

Golden Valley Animal Hospital
651 Winnetka Avenue North
Golden Valley, MN 55427
763-546-2323



Greenbrier Animal Hospital
11040 Cedar Lake Road
Minnetonka, MN 55305
952-542-1012

BOARDING RELEASE FORM and NOTICE

In order that we may provide the best care possible for your pet while it is here, we ask that you provide us with the following information:

Owner's name _____ Pet's name _____

Date pet starts boarding _____

Date pet will be picked up _____ Approximate time of pick up _____

In case of emergency, at what phone number can you be reached (____) _____

If you can't be reached, who has permission to make medical decisions for your pet?

Name _____ Phone (____) _____

I would like my pet bathed on (date) _____ (There is an additional charge for bathing)

***Your pet will be bathed at an additional cost if it soils itself.**

- Our policy is to charge for a full day the first day your pet is boarded regardless of the time of admission. You will not be charged for the day you pick up your pet if it is picked up before noon. Please check our office hours as no pets will be released after normal office hours. **We are NOT open on Saturday afternoon or Sunday.**
- For your pet's safety and the safety of others, your pet's vaccinations (including kennel cough) and fecal test must be current while boarding with us. If your pet is due for this routine health care, it will be updated upon arrival.
- All dogs and indoor/outdoor cats are required to have Frontline flea and tick preventive applied during the months of April-October. If necessary, your pet will have Frontline applied upon arrival for boarding.
- If your pet requires daily medications be given, there is an additional charge for their administration due to the additional time and record keeping involved. Our staff would be happy to provide you with an estimate of costs at your request.
- Owners will be charged for medical treatment and medication needed for reasons that are beyond our control. Occasionally while away from familiar surroundings, a pet may experience a medical problem. Conditions such as diarrhea, vomiting, ear infections and skin infections may be discovered while we are caring for your pet. We seek to prevent such problems, but you should be aware that a medical problem may develop despite the best of care.
- **Should a medical problem arise while you are away, we will care for your pet in accordance with your wishes. Please check the level of treatment you desire for your pet.**
 - _____ Do whatever is medically necessary. I want the best possible care for my pet.
 - _____ Do what is needed, but do not let the costs **above boarding** exceed \$_____.
 - _____ Do only the minimum treatment and only in the event of a medical emergency until I am contacted

NOTICE-THIS ANIMAL HOSPITAL DISPOSES OF ABANDONED ANIMALS IN ACCORDANCE WITH MINNESOTA STATUTES 346.37, SUBD. 1. BY SIGNING THIS DOCUMENT YOU ACKNOWLEDGE HAVING RECEIVED A COPY THEREOF ON THE DATE INDICATED.

Signed: _____

Date: _____