

## **Cat Boarding Check-In**

How is your pet doing?
Weight: Eating/Drinking:
Any Vomiting/Diarrhea/Coughing/Sneezing:
Any other concerns?
Own or Kennel Food - Any Food Allergies?  Feeding amount:  AM  Lunch  PM
ride year per amount out of production of try, or animor (1 of try).
<u>Medications</u> - Names and doses of all medications. Please include medication instructions.
<del></del>
<u>Vaccinations</u> – Vaccine record on file and pet confirmed up to date. Y or N
Oct Dealesson and Drives (Obsers Over)
Cat Packages and Prices (Choose One)
<b>Bronze</b> – \$34.50/night
Includes Kitty Condo, litter box w/ daily cleaning, and bedding
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Silver \$42/pight
Silver - \$43/night
Includes all the above services plus:
One daily TLC time with a staff member
Cold OFC/winkt
Gold - \$56/night
Includes all the above services plus:
<ul> <li>One daily playtime in the cat boarding room with a staff member</li> </ul>
Daily catnip enrichment
Additional Services:
Nail Trim (\$24)



## **Veterinary Care Pre-Authorization**

Valley View Animal Hospital is a general boarding facility and is not staffed as a medical boarding facility. General pet boarding provides basic care, including feeding, exercise, mental stimulation, and basic medication administration. Medical boarding provides 24/7 monitoring and access to immediate medical care. This is the recommended, and safest, option for animals with high-risk health conditions.

By choosing to board your pet at Valley View Animal Hospital boarding facility, you accept and acknowledge that your pet will not be monitored for 12 hours overnight, and if an emergency were to occur, no personnel would be present. During normal business hours, if boarding staff have any concerns regarding your pet's health and overall wellbeing, a veterinarian on staff will be notified, any necessary diagnostics and treatments will be performed, and you will be responsible for payment. The staff will make every effort to contact you during this time but will not delay assessment or treatment of your pet for communication.

Phone Number:	
Owner signature:	Date: