

P-FOLD2-MA STICKER

Medical Boarding at Hickory Veterinary Hospital

Arrival date: _____ Expected departure date: _____

Medications:

Medication Name	Strength (mg, ml, etc.)	Directions (MUST MATCH BOTTLE)	Last dose (day/time)

If medications are not in hospital dispensed bottles or labels do not match description, we may not be able to medicate your pet. Please pay special attention to this for the safety of your pet!

Feeding Schedule:

Type of food we will be feeding (Circle): HVH Brand (Hill's Science Diet) or Owner food (Circle)

Brand: _____ Dry / Canned (Circle)

Amount: _____ How often: Once or Twice daily (Circle)

We provide all bedding, bowls, etc. We do not recommend leaving items at the hospital for your pet while boarding as some items can be misplaced when laundered. Please provide a description of the items you are leaving with your pet (toys, bedding, collar, leash, etc.):

Please note: Hickory Veterinary Hospital is not responsible for the loss of these items.

We would like the following services for our pet while boarding:

Pedicure (\$21) Bath (\$45-55) Other: _____

Special Concerns: _____

Signature of Owner: _____ Date: _____

Technician at Intake Initials: _____