



*The Animal Health Center of Franklin  
Boarding Contract*

Owner's Name \_\_\_\_\_ Pet's Name \_\_\_\_\_

Admission Date \_\_\_\_\_ Discharge Date \_\_\_\_\_ AM/PM

Please leave a number where we may reach you in the event of an Emergency \_\_\_\_\_

In the case of an emergency that we are unable to reach you, please initial the following, indicating acceptance of related charges.

\_\_\_\_\_ You may do whatever is necessary to diagnose and treat the medical/surgical condition.

\_\_\_\_\_ You may provide only minimal care until you receive further authorization.

List anything left with your pet \_\_\_\_\_

**Procedures to be preformed while boarding:**

\_\_\_\_\_ Bath \_\_\_\_\_ Nail Trim \_\_\_\_\_ Anal Sac Expression \_\_\_\_\_ Kennel Cough Vaccine

\_\_\_\_\_ Physical Examination \_\_\_\_\_ Annual Vaccination 's \_\_\_\_\_ Heartworm Test \_\_\_\_\_ Fecal Examination

\_\_\_\_\_ AHC groom with Kandace \_\_\_\_\_ Grooming with Allison

(Grooms by Kandace or Allison are by prescheduled appointment only)

I would like the Doctor to check my pet while boarding for the following: \_\_\_\_\_

Please call prior to initiating therapy for the above: \_\_\_\_\_

Is your pet to receive medication while boarding? \_\_\_\_\_ No \_\_\_\_\_ Yes (Please Specify)

Is your pet on a special diet? Own Food? \_\_\_\_\_ No \_\_\_\_\_ Yes (Please Specify)

**General Boarding Policies:**

1. We must have proof of current vaccinations (preformed by a licensed veterinarian) on all boarding animals or the pet will be vaccinated at the owner's expense. Dogs: Da2pp and Rabies within the past 12 months; Kennel Cough (Bordetella) within the past 6 months. Cats: FVRCP and Rabies within the past 12 months.

Be aware that in some circumstances, animals are not protected against disease despite appropriate vaccination. We make every attempt to prevent disease transmission between animals. However, in a kennel situation there is some inherent risk. Release of your pet to board at The Animal Health Center of Franklin indicates your understanding of this risk.

2. If your pet has fleas and or ticks detected on admission, we require appropriate treatment at the owner's expense.

3. Boarding charges accrue from the date of admission. Discharge of boarding animals after 1:00 p.m. incurs the full charge for that day of board.

4. If your pet requires medication or special care, there are additional charges for these services.

5. Our regular office hours are Monday-Friday (7 a.m.-6 p.m. and on Wednesday until 8 p.m.) and Saturday (8 a.m.-11 a.m.). In addition to these hours, admission or discharge of boarding animals can occur on Sunday from 5:00 p.m.-5:30 p.m. only

I understand that The Animal Health Center of Franklin will use all reasonable precautions to guard against injury, escape or illness. It is thoroughly understood that I accept all associated risks and will not hold The Animal Health Center of Franklin liable or responsible in any manner related to the care and safekeeping of my pet. I accept full responsibility for services provided and agree to the conditions stated above.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_