

🐾 AHAH Boarding Form 🐾

Client Name: _____ Pet Name: _____ Account Number: _____

Drop off Date: _____ Pick Up Date: _____ Approximate Pick Up Time: _____

Phone #: _____ Emergency Contact & Phone #: _____

Special Instructions/Services/Medical Conditions/Allergies: _____

You never know when a photo opportunity might arise! In case we capture a cute picture of your pet, please leave us your email address so we can send it to you while you're away! _____

🐾 The AHAH Boarding Experience 🐾

- 🐾 Each dog will have his/her private run (housemates can stay together in the same run, if preferred). Each cat will have his/her private condo (unless multiple cats from the same home prefer to stay together, then 2 condos will be linked).
- 🐾 Dogs will have a "cozy cot" and cats will have a "comfy couch" provided by AHAH. You may bring their personal bedding, blankets, and toys to give their accommodations a more personal touch, if desired.
- 🐾 All dogs will be fed dry Purina EN once a day and cats will be fed dry Science Diet once a day. If your pet is on a special diet and/or needs to adhere to a specific feeding schedule, please let us know and we will be happy to comply.
- 🐾 All dogs will be walked no less than twice a day in our dog exercise area. All cats will have 2 play periods with a member of our kennel staff each day. (Additional activities are available al la carte.)
- 🐾 All pets will be brushed once a day.

🐾 Emergency and Medical Treatment Authorization 🐾

I understand and agree that if the need arises, emergency medical treatment for my pet will be provided by the doctor(s) and staff of Asheville Highway Animal Hospital and I agree to pay all reasonable costs associated with such treatment.
In the event of an illness or emergency, a representative from Asheville Highway Animal Hospital will make every effort to contact me at the numbers I have provided. If I cannot be reached within a reasonable amount of time, I authorize the doctors of Asheville Highway Animal Hospital to make medical decisions in the best interest of my pet.

Signature: _____ **Date:** _____

🐾 Personal Belongings Waiver 🐾

In order to protect your pet's health, the staff at Asheville Highway Animal Hospital may remove your pet's belongings should they become a medical risk, i.e. chewing, swallowing, or entanglements. This facility maintains the right to facilitate any medical procedures needed at the expense of the client should ingested items cause sickness.

Signature: _____ **Date:** _____

🐾 A la carte Services 🐾

Please mark each desired service

- Supervised 15 minute play time with activities in our dog exercise area.**
\$5.00 / Per Session / Per Pet - Please let us know which activities your pet would most enjoy, as well as how many sessions you'd like for them to receive! _____
- Playing with Bubbles
 - Frisbee / Ball Toss
 - "Pool Party" in shallow pool (weather permitting)
 - Treadmill Walks
- Bathing**
Each bath includes bathing, brushing, nail trim, ear clean & anal gland expression. Bathing is available for cats and dogs.
Prices vary according to size of pet and condition of hair (mats, etc).
- Grooming**
Every groom includes hair cut, bathing, brushing, nail trim, ear clean & anal gland expression. Grooming is available for _____ cats and dogs, by appointment.
Prices vary according to size of pet and condition of hair (mats, etc).
- Sunday Pick Up**
Don't want to wait until Monday to pick up your pet? No problem.
Available **by appointment only**, AHAH now offers Sunday pick up between 6:00 -6:30pm. **\$12.50, pre-paid.**

🐾 Medications 🐾

Please list all medications that your pet will need while staying with us.

1. Medication: _____ Dose: _____ Directions: _____
2. Medication: _____ Dose: _____ Directions: _____
3. Medication: _____ Dose: _____ Directions: _____

🐾 Feeding Instructions 🐾

AHAH Food Own Food

Brand/Type: _____ Amount/Frequency: _____

🐾 Personal Belongings 🐾

Carrier Bedding Leash Toys

Description: _____
