

# BOARDING AGREEMENT

Mission Road Animal Clinic  
9420 Mission Road  
Prairie Village, KS 66206  
(913) 649-0552

First and Last Name:  
Pet's Name:

Drop off Date \_\_\_\_\_

Pickup Date \_\_\_\_\_

Estimated Pick Up Time \_\_\_\_\_

\*if a bath is requested, pick up *must* be after 12:00pm\*

Go-Home Bath/Nail Trim? (\$24-\$30)      YES      NO

In case of emergency, I can be reached at the following #: \_\_\_\_\_

Additional emergency contact: \_\_\_\_\_ #: \_\_\_\_\_

In order to protect all of our boarders, we require pets to be current on vaccinations, flea, tick, and intestinal parasite free. ***Any pets not current on vaccinations will be vaccinated.*** In addition, pets will be treated at the owner's expense for fleas, ticks, or intestinal parasites if they are deemed a possible risk to our facility.

Reasonable precautions will be used against injury, escape, or death to the pet. The clinic and staff will not be held liable for problems that develop provided reasonable care and precautions are followed. *I understand that any problem that develops during my pets stay will be treated as deemed appropriate by the staff and or veterinarian.* I assume full financial responsibility for any treatment expense involved. ***Fees are to be paid in full at time of discharge***

Our records indicate your pet is due for the following required care that ***will be given*** during his/her stay: \_\_\_\_\_

Additional recommended treatments: \_\_\_\_\_  
accept / decline

\_\_\_\_\_  
Owner/ Responsible Party

\_\_\_\_\_  
Date