

Mulberry Grove Animal Hospital
7101 S.E. Highway 42 Summerfield, FL 34491
Boarding Agreement

I understand you can not guarantee the health of My Dog I understand and will not hold the clinic responsible for conditions that are unavoidable in boarding kennels, such as but not limited to weight loss, hair loss, upper respiratory infections, bronchitis, diarrhea, and fleas. I understand all pets admitted to the clinic must be protected against communicable contagious diseases and must be free of internal and external parasites or will be treated on entry or discovery at the owner / agent's expense. I understand that in the event of My Dog's illness, the staff will make every reasonable attempt to contact me or my agent to discuss the problem and treatment options.

If the staff is not able to contact me please proceed in the following manner:

- Please treat My Dog as indicated, including non-emergency conditions (e.g. skin problems, eye problems, etc) you need not call me. I agree to pay in full, all charges
- Perform only emergency and supportive care. Notify me for permission to begin any other treatment.

Should an **EMERGENCY** arise, I authorize the medical staff to sedate My Dog and/or perform such emergency procedures as may be necessary for the health of My Dog until I can be notified. I agree to pay, in full, all charges for necessary services rendered for and to My Dog.

The clinic is to use all reasonable precaution against injury, escape, or death of My Dog. The clinic and staff will not be held liable for any problems that develop provided reasonable care and precautions are followed. I understand that any problem that develops with My Dog will be treated as noted above and I assume full responsibility for the treatment expense incurred.

I understand that the clinic is not responsible for loss or damage to personal items left with the pet including but not limited to leashes, collars, toys, and bedding.

- To my knowledge, my dog does not climb over fences.**

I will call if my "pick-up date" changes so you can plan accordingly. If I neglect to pick up My Dog within 5 days of the date scheduled for discharge, and do not notify you within that time period, you may assume that My Dog is abandoned and are hereby authorized to dispose of My Dog as you deem best and/or necessary.

I have been provided with a copy of the boarding policy handout/brochure explaining boarding policy and regulations.

I understand there is an additional charge for any pet deemed aggressive during the boarding period. I understand that this boarding consent form remains in full force and effect until Mulberry Grove Animal Hospital receives written notification to the contrary and that it shall be binding on any future boarding arrangements.

Date: 10/26/2018 Owner / Agent:

Name & Phone Number of authorized and available person to be reached in an emergency or in the event of an

- By checking this box, I am giving permission for my pets photograph to be taken and used on a social media site.