

OLD TOWN



Horse & Pet

Welcome to OTHP Boarding!

Please fill out the form below, you only have to fill this sheet out once, so please give as much accurate information as possible.

Date: _____

Owner Information

Your Name: _____

Phone #: _____

Address: _____

Emergency Contact Please list people that can act on your behalf.

Name: _____

Phone #: _____

Name: _____

Phone #: _____

Name: _____

Phone #: _____

Pet(s) Information

Pet 1 Name: _____

Birthday/ Age: _____

Breed: _____

Spayed/ Neutered: _____

Pet 2 Name: _____

Birthday/ Age: _____

Breed: _____

Spayed/ Neutered: _____

Pet 3 Name: _____

Birthday/ Age: _____

Breed: _____

Spayed/ Neutered: _____

If there is aggression between pets, we will separate them. Additional kennel rates will apply.

Pet Personality

We want your pet to receive the best care possible, knowing them helps us do that!

Aggressive towards people or animals?

If Yes, explain: _____

Climb fences, dig, push under fences, jump walls, dart?

If Yes, explain: _____

Play/spill water or food?

Chew bedding?

Fears?

If Yes, explain: _____

Veterinarian Information

Vet/Clinic Name:

Phone #:

Any health/medical conditions that we should be aware of?

If yes, please explain. *Fill out any medication information on the attached sheet.*

Is there anything else we should know?

By initialing, I am stating that my pet(s) have current vaccinations and that I am responsible for providing current vaccines for my pet. This includes Rabies, Parvo/Distemper, and Bordetella for dogs.

By initialing, I am stating that my pet(s) have current vaccinations and that I am responsible for providing current vaccines for my pet. This includes Rabies and FVRCP for cats.

By initialing, I authorize Old Town Horse & Pet to provide necessary treatment for my pet at my expense; this includes but not limited to flea/tick treatment.

By initialing, I authorize that the flea/tick preventative Spot On can be put on my pet(s) if deemed necessary.
If not, explain: _____

By initialing, I acknowledge that there is no overnight staff; staff is only available during business hours.

Print Name:

Date:

Signature:

This document is still accurate and up to date:

Initial:	Date:
Initial:	Date:
Initial:	Date:
Initial:	Date:

Initial:	Date:
Initial:	Date:
Initial:	Date:
Initial:	Date:

Thank you for choosing Old Town Horse & Pet!