



**Muddy Creek
Animal Care Center**

Kennel Boarding Registration

Pet's Name:

Weight:

Feeding Instructions:

Own Supply (**specify brand**):

Kennel Supply (see attendant for choices):

Cups per meal:

How many times a day: Twice Daily _____ Three Times Daily _____

Has your pet eaten today? am _____ pm _____

Medication Name	Dosage	Frequency

(Please ask a Client Care Coordinator for price details)(Injection administration fees may vary)

Has your pet had his/her meds today? No _____ Yes _____

Diabetic dogs: AM and PM schedule is as follows: feed at 7 and inject at 7:30.

Does your dog finish his/her food in the 1/2 hour time allotted prior to being injected?

No _____ Yes _____

If not what amount is generally consumed? _____

Medical Problems:

Does your dog have any health issues (i.e. diabetes, arthritis, etc.)? No _____ Yes _____

If yes, please describe:

Does your dog require any special medication or treatment for the above condition(s)?

No _____ Yes _____

If yes, please describe:

Has your dog been seen by his/her regular veterinarian in the last 6 months for anything beyond a wellness visit? No _____ Yes _____

If Yes, please describe:

Does your dog have any incision/sutures/staples? No _____ Yes _____

If Yes, please describe date, location, reason:

Body Checks are performed daily by our attendants. Does your dog have any lumps, warts or growths that we should be aware of?

No _____ Yes _____

If Yes, please describe and indicate location:

Has your dog been treated with flea/tick medication within the last 30 days?

No _____ Yes _____

If yes, please indicate the date the flea/tick medication was applied:

Is your dog a shredder? No _____ Yes _____

Is your dog afraid of thunderstorms? No _____ Yes _____

Any other phobias?

Does your dog have any allergies: No _____ Yes _____

If Yes, please specify:

Optional Services:

Exercise for Fido (Kennel Only): What activities does your dog like to do during his/her exercise time? Please circle :

play fetch leash walk free roam around the yard

Every other Day _____	Plan#1: _____ 1 -15 min. session daily \$7 each day	Plan#2: _____ 2 -15 min. sessions daily \$14 each day	Plan#3: _____ 1- 30 min. & 1-15 min. session-\$21 each day	None _____
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Fido's One on One time: One on one time with an attendant in a quiet area. Some dogs simply prefer to be brushed, scratched during this one on one time. Sessions run 15 minute each and are \$7 per session

EOD _____ Once Daily _____ Twice Daily _____ Three Daily _____ None _____

Grooming: Would you like your pet groomed during their stay with us? If Yes, please schedule an appointment when making the reservation or at the time of check-in.

Your pet's health and happiness is our primary concern. If the animal attendants notice a medical problem they will attempt to contact your emergency number. An emergency contact number MUST be provided upon check-in. The emergency contact person MUST be an adult, capable of making decisions for you regarding your pet's health and able to be reached within the continental U.S. Please note that whomever you choose as your emergency contact they are authorized to make medical decisions for your pet. You will assume all financial responsibilities for approved medical services provided during your pet's stay. Should a life threatening (critical) medical condition occur during their stay and attempts to reach your emergency contact are unsuccessful medical decisions regarding your pets care will be made by the doctor on duty. You will be responsible for all medical charges associated with the management of this event.

Emergency Contact and number:

Signature

Date

Client



**Muddy Creek
Animal Care Center**

Consent to Treat Form – Boarding Canine and Social Media form

Account Number:

Pet Name:

Name:

Address:

Home Phone:

We would like to know how to proceed if your dog develops one of the more common medical problems that can arise while boarding. Our primary concern is ensuring your dog's comfort and his/her ability to receive rapid medical treatment should problems occur. The common boarding ailments below describe what initial measures are taken by the staff to remedy the problem. Should your dog not respond to these initial measures, further treatment may be warranted.

Common Boarding Ailments

Initial measures taken for these ailments

Stress colitis (diarrhea)

Fecal analysis; switch to a bland diet. My dog's diet can be altered. Yes___ No___

Kennel nose/ kennel paw

Clean area, apply topical antiseptic

Hot spot

Clean and shave area; apply topical antiseptic

Ear Infection

Clean ears with a non-medicated cleaner

Please select from one of the following options:

I give consent to have Muddy Creek take initial measures to treat my pet for these conditions should they occur:

_____ I give my permission to have Muddy Creek take initial measures to treat my pet for the above conditions or another urgent medical issue (as deemed by our medical staff) should they occur. If standard protocols do not correct the problem and an exam with the veterinarian is indicated, I do not need to be contacted first.

_____ I give my permission to have Muddy Creek take initial measures to treat my pet for the above conditions or another urgent medical issue (as deemed by our medical staff) should they occur. If standard protocols do not correct the problem and an exam with the veterinarian is indicated, I would like to be contacted first.

_____ I would like to be contacted before any measures are taken to treat my pet for any condition, including the ones listed above. I understand that if neither I nor my emergency contact is reachable, or if my emergency contact does not give permission to treat until I am reached, Muddy Creek will take the necessary steps to stabilize my pet and alleviate pain and discomfort until I am contacted.

The above conditions have been explained to me and I understand that I am responsible for all costs incurred for any exams, diagnostics and treatments provided.

Does your pet have any known drug or food allergies/ reactions? Yes___ No___

If "yes", please indicate suspect drugs or foods: _____

Please select whether you approve or decline to give us permission to use your pet's photos as outlined below:

☐ **Approve use** ☐ **Decline use**

I hereby give Vetcor and Muddy Creek Animal Care Center permission to use photographs of my pet, on Facebook and other social media applications. I also grant permission for Vetcor to publish photographs of my pet for promotion of the organization in printed publications, photographic displays on the Vetcor web-site.

Client Signature _____

Date _____



Date:

Pet Name:

Account Number:

Client:

Address:

Home Phone:

All animals are boarded, handled or cared for by us without liability on our part for loss or damage from disease, death, fire, injury to persons, other animals or property by said animals, or other unavoidable causes.

Each animal is insured up to \$2,000. Each occurrence is insured up to \$50,000.

If an animal becomes seriously ill, we will attempt to notify the owner or emergency contact person. In the event the owner does not immediately inform us of desired measures to be taken, or if the state of the animal's health demands immediate action, we reserve the right to have our veterinarians or those within the VetCor network of hospitals administer necessary medical treatments within our discretion or judgment. Such expenses shall be paid for by the owner upon dismissal of the animal.

Some exotic pets are considered prey animals and may become extremely stressed in a boarding environment. Although rare, such stress can lead to death in exotic pets. I understand and assume the risk associated with boarding exotic pets.

If an animal is not picked up within 30 days after the scheduled discharge date, it will be disposed of by us as we see fit. Notice in writing of such intent will be mailed to the owner by registered mail at the address given hereon. The owner shall be held liable for all charges.

We are not responsible for the loss or damage of any belongings, such as blankets or toys that are brought in with the animal.

The owner represents that he/she is the legal owner of said animal and that said animal is not mortgaged in any way. The above mentioned animal(s) has/ have not been exposed to distemper, parvo virus, rabies or kennel cough within the last 30 days.

I have read and been advised of common boarding ailments that may occur during boarding. I understand these protocols and the measures that will be taken should my pet become ill. I agree to pay all associated fees that may incur due to medical treatment provided by Muddy Creek Animal Care Center and/or Bulger Veterinary Hospital upon dismissal of my pet.

Client Signature: _____ Date: _____
(owner or appointed guardian of animal)

This contract is legally binding and will be a part of the animal's permanent record

Appointment date: ____/____/____

Department: _____

Crate/Condo #: _____

TGH: ____/____/____

Muddy Paws Salon

Pets name: _____ **Breed:** _____ **Age:** _____

Phone number (that we can reach you at today/day of grooming): _____

If your pet is here for boarding/grooming, would you like them to go outside after? _____

- ☐ **Hair cut includes:** haircut, bath (basic shampoo), nail trim, ear cleaning/plucking if necessary, brush, and fluff dry

What specific haircut would you like (*Groomer must go over w/ client*):

- ☐ **Baths includes:** basic shampoo, nail trim, ear cleaning, Sani trim if necessary and fully dry.

All other services are additional charges: (select all that you would like added) ____ De-Shed Treatment

____ Express Anal Glands (External)

____ Oatmeal Shampoo

____ Nails Dremelled

____ Hypo Shampoo

____ Teeth Brushing

Please note: Dogs or cats with long and/or thick hair are more susceptible with matts. Brushing the matts out (de-matting) is difficult, time consuming and is painful and makes the pet at risk for injury. Matts can also lead to skin medical conditions if left ungroomed for long enough. De-matting prices are subject to change and depends on the severity and difficulty to complete. If de-matting is not possible or if it is not wanted the stylist will be unable to give your pet a haircut or bathing your pet may cause the matting to become worse especially with cast matting.

____ **Please initial you are aware of our matting policy:** Pets with severe matting must be shaved to the appropriate length please initial here if you wish to have your matted pet groomed.

____ **Please initial you are aware of our safety policy:** Safety is Muddy Paws Salon's main priority for pets and staff alike. Senior pets/pets with health issues may become stressed during the grooming process. Other pets may become nervous which may cause aggression. Pets may be groomed or not by the groomers/supervisor's discretion.

____ **Please initial you are aware of our flea or tick policy:** Muddy Creek strives to be a flea free facility. If your pet has any fleas, they will be given a flea bath at your expense of an additional \$10.00. Ticks will be removed at an additional charge depending on how many are removed and you will be notified if any are found at pick up.

Signature: _____ Date: _____