

Quail Ridge Animal Hospital
937 Mica Dr. Suite 18 ~ Carson City, NV 89705
775-267-4888 ~ fax 775-267-3337
QuailRidgePets.com

Authorization for Boarding

Client's Name: _____ Phone Number(s): _____

Pet's Name: _____ Type of Pet: _____

Dates of Visit: _____ Emergency Contact Name & Phone: _____

Proof of Vaccines: Yes No If No, what vaccines does the guest need? _____

ALL Common Vaccines and Annual Exam are required prior to Boarding at QRAH

Cost of Services - Annual exam with Boarding \$38 (save \$11) Please circle needed vaccines below

Canine Vaccines

Rabies - \$18 - Required
Da2PP - \$23 - Required
Da2LPP - \$23
Lepto - \$22
Bordetella - \$20 - Required
Influenza - \$36

Feline Vaccines

Rabies - \$18 - Required
FELV - \$22.50
FVRCP - \$16 - Required

Other Services

Anal Glands - \$18 Nail Trim - \$15

Other procedures your pets need while staying with us:

Payments for All Services provided for your Pet is due upon Pick-Up. Our Hours of Operation are as follows:
Monday – Friday 7:30am – 6:00pm (we are not open on weekends). If your pet is picked up before 12:00pm
(noon), you will NOT be charged for a Day Board on the day of Pick-Up. _____.

I understand that if overnight care is needed for my pet, Quail Ridge Animal Hospital does NOT have staff on site between the hours of 6:00pm – 7:30am and my pet will be left unattended. An alternative emergency hospital for overnight care will be offered. _____

While I accept that all procedures will be performed to the best of the abilities of the staff at this hospital, I understand that no guarantee or warranty has been made regarding the results that may be achieved. I agree to pay a deposit of the estimated fees, assume financial responsibility for the remaining fees, and provide payment via cash, credit card, or check at the time my pet is discharged from the hospital. **Should unexpected life-saving emergency care be required the staff _____ has/_____ has not my permission to provide such treatment and I agree to pay for such services.**

I have read and fully understand the terms and conditions set forth above:

Signature of Owner: _____ **Date:** _____