



## Animal Hospital at Oakleaf Plantation

Glenda Wiechman, D.V.M.  
 8483 Merchants Way  
 Jacksonville, FL 32222  
 (904) 317-6555  
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### Boarding Agreement

Today's Date \_\_\_\_\_ Date of Pick Up \_\_\_\_\_

Owner \_\_\_\_\_

Phone number(s) where you can be reached \_\_\_\_\_

Emergency contact(s) \_\_\_\_\_

**Pick up before 11:00 a.m.**

**Pick up for pets that are receiving a bath is after 2:00 p.m. You will not be charged for another day of boarding, ONLY for the bath.**

**There will be an additional charge for the administration of medication.**

Pet's Name		Pet's Name		Pet's Name		Pet's Name	
Bath Y/N	Dip Y/N	Bath Y/N	Dip Y/N	Bath Y/N	Dip Y/N	Bath Y/N	Dip Y/N
Medications Y/N		Medications Y/N		Medications Y/N		Medications Y/N	
If yes, has pet been given medication today? Y/N What time? _____		If yes, has pet been given medication today? Y/N What time? _____		If yes, has pet been given medication today? Y/N What time? _____		If yes, has pet been given medication today? Y/N What time? _____	
How often to feed? 1 time daily AM or PM 2 times daily AM or PM		How often to feed? 1 time daily AM or PM 2 times daily AM or PM		How often to feed? 1 time daily AM or PM 2 times daily AM or PM		How often to feed? 1 time daily AM or PM 2 times daily AM or PM	
Has your pet been fed today? Y/N		Has your pet been fed today? Y/N		Has your pet been fed today? Y/N		Has your pet been fed today? Y/N	
How much should we feed your pet? _____		How much should we feed your pet? _____		How much should we feed your pet? _____		How much should we feed your pet? _____	
Pet's belongings: carrier, collar, leash, toys, etc. _____		Pet's belongings: carrier, collar, leash, toys, etc. _____		Pet's belongings: carrier, collar, leash, toys, etc. _____		Pet's belongings: carrier, collar, leash, toys, etc. _____	

The hospital shall not be responsible for the loss, theft, or destruction of any personal property left with the above pet(s).

Special Instructions ( include detailed medication directions and anything you wish the doctor to check for) \_\_\_\_\_

I fully intend to pick up my pet(s) on the above date specified. If circumstances change, I will notify the Animal Hospital at Oakleaf Plantation of the new pick up date.

Signature \_\_\_\_\_ Date \_\_\_\_\_