



Animal Hospital
of
Soquel

Lodging Information

For the safety and health of all animals in the hospital, boarding pets must have current vaccinations at least 72 hours prior to lodging.*

The lodging staff is on-site from 7am-8pm, seven days a week.

- Dogs must be vaccinated for Rabies, Bordetella, DHPP, and Canine Influenza
- We provide an outdoor play yard for dogs. They get rest and play cycles through-out the day
- Cats must be vaccinated for Rabies and FVCRP. All exotics must have a current exam
- Cats are housed inside multi-tiered kitty condos, inside a cats-only room where there are windows for sunshine.

PICK UP & DROP OFF HOURS: are from 8:00am-7:30pm 7 days a week. The Main hospital closes at 6pm Monday-Friday and at 5pm on Saturday. Sunday the hospital is closed. If you will be picking up after hours, call before closing to give payment. There will be a sheet of paper on the "exit only" door of reception with colored paw prints and a contact number for afterhours pick up. Late pick up will result in a \$15 fee.

OVERNIGHT STAYS ARE REQUIRED TO BE PICKED UP BY NOON OR A DAYCARE FEE WILL BE APPLIED.

IF YOU DO NOT PROVIDE 24 HOUR NOTICE TO EXTEND A RESERVATION, THERE WILL BE A \$15 SURCHARGE PER DAY FOR EACH ADDITIONAL DAY.

ALL PRESCRIPTION MEDICATION MUST BE IN ORIGINAL PRESCRIPTION BOTTLE W/ DOSING LABEL.

Sexually mature un-altered males are permitted to socialize with staff pets only. We cannot accommodate females in heat as it is unsafe for the other pets.

Dog Boarding
 Over 31 lbs.....\$48/night
 30 lbs or less.....\$44/night
 not suitable for play groups + \$3

Doggie Day Care
 Over 31 lbs\$40
 30 lbs or less.....\$36
 not suitable for play groups + \$3

Cat Boarding
 \$35.00/night

Exotic and Avian Boarding-Prices vary

For pets who require medication:
 Oral or Topical Medication: \$12/day
 Injection Medication (e.g. Insulin): \$20/day
Cost of House Food: \$7/day

Family Deal: receive a \$5 discount per night for each additional pet when they share the same kennel.

Please sign below to acknowledge you have read and understand the above information.

First/Last Name: _____ Signature: _____



Yearly lodging/Daycare consent form:2021

Client Name: _____ Client Phone: _____

Pets Name: _____ Species: _____

Breed: _____ Age: _____ Sex: _____

Emergency Contact(s): _____ Emergency Phone Number(s): _____

Are you providing food for your pet? YES _____ NO _____ (If no, an extra fee of \$7 per day will be added)

Describe diet and feeding instructions: _____

Does your pet have any allergies? YES _____ NO _____

If yes, please describe: _____

List any medication(s) and when they were last given (must be in original prescription bottle):

List any special instructions or requests: _____

Do you permit the use of photo/video of your pet for social media/promotional purposes: YES ___ NO ___

- **Permission for supervised play groups for dogs only: YES _____ NO _____**
- **In order to keep the lodging area "flea free", if fleas are found on your pet(s) they will be treated with a topical flea preventative at an additional charge.**

I, my agent, any member of my family or representative, hereby agrees to indemnify, to hold harmless and to release from liability, Animal Hospital of Soquel for any and all risks associated with the lodging services and for any claim against Animal Hospital of Soquel, including legal costs to defend such a claim whether or not the damages are caused in whole or in part by the negligence, actions or inactions of any of these parties. We understand that due to circumstances beyond anyone's control, if I am authorizing my pet to socialize with other lodging pets, accidents or health issues may occur. My signature below authorizes any veterinarian at Animal Hospital of Soquel to order or provide any necessary medical attention and treatment for my pet(s) in the event that I, or my agent, cannot be reached within 24 hours. In the event my pet experiences a life-threatening condition outside of normal business hours, and I, or my agent cannot be reached immediately, I authorize the staff at Animal Hospital of Soquel to transport my pet to an emergency veterinary hospital. I understand there are no veterinarians or staff member's onsite between the hours of 8pm and 7am, and that my pet will be secure, but unsupervised during this time. Signing below indicates my understanding and agreement to the terms contained within this agreement, and that I am delivering my signature freely, voluntarily and unconditionally.

Owner's Name (print): _____ Owner's signature: _____