

DAYCARE FORM

This form is available on our website www.elliottbayah.com

Client name	Pet'(s) name				
PHONE NUMBERS: (1st)		(2	nd)		
E-MAIL (optional)					
Is any other person authorized to pick up yo					
Do we have your permission to post your p	et's photo on (our website	or Facebook page?	YES	NO
Would you like for your pet to have?	playtime s	playtime session - 20 minutes (additional fee)			
	bath and/	or toe nail	trim (prices available upon re	equest)	
Does your pet need a meal today?	YES	NO			
If yes, with what brand or base (chicken, la	mb, etc) would	you like us	s to feed your pet?		
				Dry	Can
How much should we feed your pet(s)? A	M	PM _			
Please list any food, drug, or environmenta					
Please advise us if your pet has any history	of aggression t	owards oth	ner people or other animals.		
Does your pet need a prescription refill too	day? YES	NO	Please specify		
Is your pet on medication? YES NO)				
ORIGINAL CONTAINERS MUST BE PROVIDE	<u>:D</u>				
If yes, please state directions and dose					
When was the last dose given?					
When should we give the next dose?	·				
All animals entering Elliott Bay Animal Hosp must be current on all required vaccines, ar not met, the appropriate services will be pr during regular office hours and payment is pick up date above, Elliott Bay Animal Hosp or humanely dispose of the pet(s) as they d	nd be free from ovided and you required at tha ital may assum	internal and will be chettime. If I ethe pet(s	nd external parasites. If thes arged accordingly. Pets will I neglect to pick up my pet with the control of the	se condition be released thin 5 days	ns are d only of the
SIGNATURE			DATE		