

AUTUMN TRAILS VETERINARY CENTER
2407 HYDRAULIC ROAD
CHARLOTTESVILLE, VA 22901
434-971-9800

Autumn Trails Veterinary Center Boarding Policy Agreement

General Policy: It is the policy of Autumn Trails Veterinary Center ("ATVC") to offer conscientious, affectionate, and individual care of each animal left in our trust. We will provide clean, sanitary, and safe quarters.

Boarding Charges: Charges are applied per night. All pets will be checked in during regular business hours. Check-in and out are from 8am to 8pm seven days a week. Check-ins and outs will not be allowed on holidays on which the hospital is closed.

Medications: Our kennel staff is trained to administer medications. Please be sure all medication is in the original container with the pet's name and dosage information. For administration of eye, ear, oral, or topical medications there is an additional fee of \$6 per night. For pets requiring daily injections there is an additional fee of \$10 per night. For pets requiring multiple medication administration, special care, or medical supervision as deemed necessary by the veterinarian, will be charged an additional fee of \$10 per night.

Belongings: We ask that you limit your pet's belongings to FIVE items. All bedding must be machine washable (no foam centers). Be sure all items are labeled with your pet's name so we may insure it also goes home with you. ATVC is not responsible for personal items such as, but not limited to, collars, leashes, bedding, toys, and carriers. Although every effort will be made to care for these items, ALL ITEMS ARE LEFT AT YOUR OWN RISK.

Entrance Requirements: All pets must enter clean, free of fleas and ticks, and intestinal parasites. Pets must be on a veterinarian approved flea and tick prevention that is applied within 30 days of the length of the stay. If a pet is not current on a preventative then one will be administered at the owner's expense. All pets are required to have a negative fecal float to check for intestinal parasites, within one year of the pet's stay.

Vaccinations: To insure protection of all animals under our care and to prevent the spread of infectious disease, boarded animals must be current on all vaccinations. Owners must submit written verification from a veterinarian that their animals have been vaccinated. Canine vaccination requirements include rabies, DA2PP, bordetella, and influenza. Feline vaccination requirements include rabies and FVRCP. **PROOF OF VACCINATION IS REQUIRED FOR ADMISSION.**

Puppy/Kitten Waiver: This only pertains to pets below 16 weeks of age. The risks associated with boarding my pet that has not completed their veterinarian recommended vaccination series as stated above, have been explained to me and I still choose to board my pet at ATVC.

Your Agent: You must provide an alternative/emergency contact ("Your Agent") that you authorize us to contact in the event that you are unreachable. You agree that your agent has full authority to make all decisions, including, but no limited to expenditure of funds and veterinary treatments and/or procedures. In the event that another person is to pick up your pet, please provide us with their name and number(s) at the time of check-in. We require that all charges be paid for at the time of check-in if someone else will be picking up your pet(s).

Limitation of Liability: ATVC cannot guarantee the health of any animal, but pledges to give the appropriate care to all boarded pets. By signing below, I agree to hold ATVC harmless for conditions that often are unavoidable in boarding environments, including, but not limited to: weight loss, rough hair coat, kennel cough, upper respiratory infection, vomiting, diarrhea, and intestinal parasites. Further, I agree to hold ATVC harmless for any loss, disease, or injury to persons, property, or other pets caused by my pet or inflicted on my pet by another boarded animal. For animals sharing a kennel, please sign the Shared Accommodation Waiver.

Right to Refuse Services: ATVC holds the right to refuse boarding services to pets whose behavior endangers the staff of ATVC or other boarded animals. This will be determined by the Practice Manger. If the behavior is determined as dangerous by the Practice Manager, the owner will be contacted and the pet will not be allowed to continue their stay at ATVC. If the pet injures any person on the property causing them to seek medical attention, the proper authorities will be contacted. If the behavior has not caused physical harm, a reasonable attempt will be made to accommodate the pet until the end of the scheduled stay, but they will not be allowed to return for future boarding accommodations.

Initial X_____

Payment of Fees: I understand that all charges are due and payable upon my pet's discharge. A deposit may be required for an extended stay prior to or during my pet's reservation at the discretion of the Practice Manager.

Holidays: A \$50 non-refundable deposit is required for any pet(s) scheduled to board within a week of a national holiday. Due to the high demand during the holidays, if you are unable to keep your reservation, you will forfeit your deposit. Holiday deposits will NOT be refunded and are NOT transferable.

Abandonment: Should the circumstances arise that a pet(s) remain unclaimed by Owner after the date, which is stated as the pick-up date, I understand that an attempt to notify Owner will be made. Ten days after such notice the pet(s) will be considered abandoned and property of ATVC. It is further understood that such action will not relieve Owner from paying all costs of services and treatments rendered.

Continuing Agreement: I agree by executing this agreement, the provisions hereof constitute a continuing agreement between ATVC and me for any subsequent boarding of my pet(s).

Medical Care Waiver: Owner understands they have entrusted the care of their pets to ATVC. In the event of an emergency or pet illness ATVC will make every effort to contact Owner or their emergency contact, and in the event either of them cannot be reached in a timely manner, or if the Owner's emergency contact will not give ATVC directions on how to proceed, ATVC will proceed with medical treatment as deemed appropriate and in the best interest of the pet by the attending veterinarian. This can include, but is not limited to, stabilizing care, diagnostic tests, prescribing medications, and/or emergency surgery. Owner further understand that by entrusting care to ATVC for boarding, Owner is responsible for all additional medical charges incurred by their pet to maintain the pet's medical wellbeing while in the care of ATVC. Full payment for all services is due at the time of discharge.

This Agreement is made between _____ (Owner/Agent) on the one hand and Autumn Trails Veterinary Center ("ATVC") on the other, as of _____ (Date), concerning the boarding of the Owner's/Agent's pets. I am at least eighteen (18) years of age, and competent under the laws of the State of Virginia to enter into this Agreement/Release. I have read this Agreement/Release, and been given sufficient time to understand it, or seek the advice of an attorney. I acknowledge that this Agreement/Release is intended to be binding, and voluntarily enter into it.

Owner/Agent Signature Date

Owner Printed Name

Emergency Contact Name/Relationship

Emergency Contact Phone #

Regular Veterinarian

Is there anything special we need to know about your pet? (Illnesses, chews blankets, behavioral issues, jumps fences, etc.) _____

Shared Accommodation Waiver: PLEASE SIGN IF YOU WILL HAVE TWO PETS SHARING ONE KENNEL

I voluntarily request that ATVC board my pets in the same kennel/run. I understand this to mean that the animals will be housed together in the confines of the requested accommodation for the duration of their stay, unless problems arise. I hereby voluntarily release ATVC, it's staff and agents from any and all responsibility or liability arising from injury or damage inflicted by one of my pets on another during their stay. In the event of such an injury or damage, I am liable for all charges of medical services provided by ATVC for treatment of said injuries or damage. I understand that in the event of aggressive behavior directed from one pet to the other they will be separated for the remainder of their stay. Owner expressly assumes the risks associated with shared accommodation boarding and release ATVC of any liability arising from the same.

Signature/Date _____

Playtime Waiver: PLEASE SIGN IF YOU REQUEST PLAYTIME WITH OTHER BOARDED PETS

I voluntarily request that ATVC allow my pet(s) to have playtime off leash with other boarded pet(s) in our fenced in yard. I hereby voluntarily release ATVC, it's staff and agents from any and all responsibility or liability arising from injury or damage inflicted by or to another pet during their social playtime. In the event of such an injury or damage, I am liable for all charges of medical services provided by ATVC for treatment of said injuries or damage. I understand that in the event of aggressive behavior directed from one pet to the other they will be separated immediately and no longer allowed to play with other boarded pets. Owner expressly assumes the risks associated with social playtime and release ATVC of any liability arising from the same.

Signature/Date _____