



Ridgewood Veterinary Hospital Doggie DayCare Admissions Form

For Staff Use Only:	
CSR	_____
AWA	_____
Valid thru	_____

Owner's Name _____ Pet's Name _____
 Phone number where you can be reached _____ Email _____
 Time you would like to normally drop off your pet ___:___A.M./P.M.
 Time you would like to normally pick up your pet ___:___A.M./P.M.

**Ridgewood Office Drop-off/Pick-up Hours: M-F-Sat-Sun 7:00 A.M. to 6:00 P.M.
 T-W-Th 7:00 A.M. to 9:00 P.M.**

This form must be filled out the first time your dog stays in Doggie DayCare, and will remain in effect for six months or until the information below changes. Payment must be made in advance or we must have payment authorization on file for DayCare Weekly and Monthly Packages. Daily DayCare must be paid at time of pick-up. In order to maintain a healthy environment for all pets, vaccines must be current. **Rabies, Distemper, Bordetella, and Canine Influenza (both strains) are required.** Your pet must be free of internal and external parasites. **A fecal sample is required every 6 months**, and your pet must be on a flea preventive while in DayCare. Attached is your dog's vaccine status. *If vaccinations or treatments for parasites must be performed, usual and customary fees will apply.* If you have received vaccines at another animal hospital, we must have a certificate on file or expired vaccines will be given (normal fees will apply). Vaccines will need to be updated whenever they expire during the six months.

My dog is due for the following vaccines/laboratory testing (comprehensive physical exam required with vaccines):

- | | |
|---|---|
| <input type="checkbox"/> DHP/CPV (Distemper/Parvo)* | <input type="checkbox"/> Leptospirosis |
| <input type="checkbox"/> RV (Rabies)* | <input type="checkbox"/> Lyme |
| <input type="checkbox"/> Bordetella* | <input type="checkbox"/> Heartworm/Lyme/Ehrlichia/Anaplasmosis Testing |
| <input type="checkbox"/> Canine Influenza Virus* | <input type="checkbox"/> Comprehensive Physical Exam (required with vaccines) |
| <input type="checkbox"/> Fecal Test* | <input type="checkbox"/> Canine Influenza Virus (H3N2) |

***Required vaccines to stay at the Ridgewood Veterinary Hospital**

Doggie DayCare includes:

- Veterinary supervision and a caring, trained medical support staff
- Individualized attention
- Complimentary Housebreaking Assistance
- Climate Controlled for heat/air conditioning/air filtration system
- Radiant heat in half of flooring/pet can choose warm or cool floor
- Exercise 3-4 times a day
- Eukanuba Low Residue will be provided for adults and Hill's Healthy Advantage Puppy Diet for those under one year (or owner provided food)/fresh water at all times
- Hammock beds in each run with blankets
- Cleaned and sanitized regularly and as needed
- Lots of love and attention

Discounted Packages Available for Long Term DayCare - must be purchased in advance and may be used individually. Individual days must be paid at time of pick-up.

Please Choose One:

- Individual daily rate: \$31/day plus tax (paid at time of pick-up)
- Weekly rate (5 pre-paid days of DayCare): \$125. (\$25/day) plus tax (paid in advance/expires in 30 days)
- Monthly rate (20 pre-paid days of DayCare): \$450. (\$22.50/day) plus tax (paid in advance/expires in 90 days)

Additional Services Available. Please check if:

- Basic training command instruction (\$5.49/day) Yes No
- Please remember that training success depends upon duration of stay and reinforcement at home. For a quicker result we also recommend our combined owner/dog training classes offered at convenient evening sessions (6 evening sessions for \$189). Please check here for more information and our trainer will contact you: Yes, I am interested. Telephone number: _____

“Hands That Heal Hearts That Care”

Ridgewood Veterinary Hospital

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- Optional overnight boarding (\$18.98 additional)

If food is not provided, we will serve Eukanuba Low Residue to adult dogs and Hill's Healthy Advantage Puppy Diet to those less than 1 year. If your pet is eating a special diet that we don't carry, please bring it in individual portions. If your pet eats a diet we carry, please bring it or bags/cans can be purchased upon arrival for your pet's use. Remaining food will be sent home at pick-up time. Please initial: _____

I hereby give the Ridgewood Veterinary Hospital permission to perform all treatments of a medical nature that cannot await my return to insure the health of my dog in my absence. I understand that if a technician or veterinarian observes any irregularities in my dog's condition or behavior, a veterinarian will examine my dog and a fee will be charged for this service. I also give Ridgewood Veterinary Hospital permission to transport my dog from one office to another as needed for health, comfort, grooming, or pick-up. **I understand if I am unable to pick up my dog by closing, an additional \$18.98 will be charged for overnight care. If my dog stays overnight and I am unable to pick up my dog by noon the following day, I will be charged an additional day of Doggie DayCare.**

Payment Methods: Cash Check Visa MasterCard AmEx Discover CareCredit

I understand and agree to all the aforementioned policies.

Owner's signature _____ **Date** _____

*The Doctors and Staff of the Ridgewood Veterinary Hospital thank you for entrusting us with your dog.
We look forward to doing all we can to ensure that your dog's stay is a happy one.*