



BOARDERS INFORMATION FORM

Please complete one sheet for each animal

OWNERS NAME

ADDRESS

CONTACT NUMBERS

REGISTERED VETS

CONTACT NUMBER FOR VETS

ABOUT YOUR PET

ANIMAL NAME

.....

BREED **AGE** **SEX**

NORMAL DIET

.....

VACCINATED - MYXO YES/NO **DATE OF VACCINATION** (Rabbits only)

RHD1 YES/NO **DATE OF VACCINATION** (Rabbits only)

RHD2 YES/NO **DATE OF VACCINATION** (Rabbits only)

VACCINATION CARD VIEWED (please bring this with you) -

REARGUARD APPLIED

LAST FLEA OR WORM TREATMENT

ANY HEALTH PROBLEMS

.....

ANY ADDITIONAL TREATMENT REQUIRED DURING THEIR STAY (if necessary please ensure that you provide enough medication to last the duration of their stay)

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DO YOU GIVE CONSENT FOR US TO PUT PHOTOS OF YOUR PET ON OUR SOCIAL MEDIA? – YES/NO