



BOARDING

REGISTRATION

307 4th Ave
Indialantic, FL 32903
(321) 306-3858 · AMCIndialantic.com

Owner

Pet's Name

How can we reach someone in case of an emergency?

Phone Call

OK to Text?

E-mail

Phone Number

E-mail Address

Food type and feeding schedule

Are you bringing your own food?

YES

NO

Any food allergies?

YES

NO

Does your pet require any regular medication while boarding?

YES

NO

Food type and feeding schedule

If yes, list medication and schedule

We do not accept any personal items other than food and medication.

Does your pet need any services other than boarding during his/her stay? Please describe

Planned pickup day

Time

AM/PM

Best guess if not sure

Do you want your pet to have a bath before it goes home? (extra charges apply)

YES

NO



**Animal
Medical
Clinic**
INDIALANTIC

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Do we have permission to use photos taken of your pet, while boarding, online? YES NO

Any special instructions?

In the event of an emergency medical condition, I hereby authorize the doctors and staff of Animal Medical Clinic to administer, at my expense, any medication, tests, anesthetics or surgical procedures that the doctor deems necessary for the health, safety or well being of my pet. I understand that at times, my pet will be left in the building without supervision.

Signature

Date