



3604 Old Bridge rd, Woodbridge, VA 22192
 (703) 494-0094
obvhfrontdesk@gmail.com

My Pet's

Boarding Care Instructions

Date: _____

Pet's Name: _____

Feeding Instructions:

(If your pet is prone to gastrointestinal issues or on a special diet, please be sure to bring your own food as a sudden change in diet may worsen these issues or cause diarrhea)

Will we be feeding our food or your pet's own food? Your food / I brought my own

(We provide Hill's science diet dry and canned food)

How often would you like us to feed you pet? 1x day / 2x day / 3x day / Other _____

If only 1x day, would you like us to feed in the Morning / Afternoon / Evening ?

How much do you feed at one serving? _____

(Please use cups as measurement. If your pet is free fed, please indicate how many cups are fed per day)

Is you pet currently taking any medications that need to be administered while boarding? Yes / No

Additional fees apply. Please consult a staff member for more details

Medication Instructions:

(If more than 3 medications are needed, please fill out the additional medications sheet)

Name of medication: _____ **How much?** _____

Given: Morning / Afternoon / Evening **With food?** Yes / No

Name of medication: _____ **How much?** _____

Given: Morning / Afternoon / Evening **With food?** Yes / No

Name of medication: _____ **How much?** _____

Given: Morning / Afternoon / Evening **With food?** Yes / No

Will your pet need heartworm or flea/tick prevention while boarding? Yes / No

What kind? Heartworm / flea/tick / both

If yes, will you need to purchase the prevention with us today? Yes / No

Name of Heartworm prevention: _____ Date to be administered: _____

Name of flea/tick prevention: _____ Date to be administered: _____

The following services may be provided for an additional fee. Please consult with a staff member for pricing

Would you like your pet to receive additional walks? 1 additional / 2 additional

Would you like your pet to receive a bath from our kennel staff during their stay? Yes / No

Would you like your pet to receive a nail trim from our kennel staff during their stay? Yes / No

Would you like to schedule an appointment with our grooming department? Yes / No

(Please be sure to fill out a grooming release form at time of drop off to indicate the desired services)

