

VIS-A-PET

Home Pet Care

BOARDING AUTHORIZATION

I, _____, give permission for VIS-A-PET Home Pet Care to transport my pet(s), while under her care, to the following location(s):

1st Choice Boarding Facility: _____

2nd Choice Boarding Facility: _____

OR friends/relatives (with pre-arranged notice to them) _____

(if the pet becomes too destructive at home posing a threat to their health and safety, OR in the event of an emergency).

I authorize the boarding facility to give out any information pertaining to my pet(s) to VIS-A-PET Home Pet Care.

VIS-A-PET Home Pet Care will not be responsible, personally or otherwise, for payment of any boarding services rendered.

Client agrees to reimburse VIS-A-PET for all expenses related to transport, boarding, and special care of Client's pet(s).

Client

Date