

**SAN ROQUE PET HOSPITAL AND PET HOTEL  
BED AND BREAKFAST ADMISSION FORM AND ESTIMATE OF SERVICES**

1. Owners Name: \_\_\_\_\_ Date in: \_\_\_\_\_ Pick up Date: \_\_\_\_\_  
 2. Pet's Name: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_ 4) \_\_\_\_\_

Our wish is to make your pet, or pets, as comfortable and as happy as possible during their visit with us. We give **attention and love**, as much as possible, along with the following services **at the following rates:**

**BED AND BREAKFAST BASIC RATES:**

**THE FULL BASIC NIGHT RATE** includes, water, Science Diet Foods fed once a day, and a blanket. Cats are "let out" to stretch on a rotational basis.

Prescription Diets are not included in the Basic Rate. We encourage you to bring in your pet's own food for them.

	<u>Rate Per Night-x</u>	<u>Nights-x</u>	<u># of Pets</u>	<u>= Total \$</u>
3. <b><u>FELINE GUESTS (BBFE):</u></b>	\$14.00	x _____ x	_____ cats	=\$ _____
4. <b><u>CANINE GUESTS (BBCA):</u></b>	\$18.00	x _____ x	_____ dogs	=\$ _____
5. <b><u>BIRDS AND RODENTS:</u></b>	\$14.00	x _____ x	_____ total	=\$ _____
6. <b><u>DAY BOARDING (BB1/2D):</u></b>	\$13.00	x _____	_____ pets	=\$ _____ per day

(Day boarding includes **ANY** of the above mentioned species. Each **DAY CARE** pet is carefully furnished with water, blanket and attention. **NO** food or other services are provided.)

**EXTRA SERVICES AVAILABLE FOR UPGRADED ACCOMODATIONS:**

	<u>Rate per Night-x</u>	<u>Nights-x</u>	<u># of Pets</u>	<u>= Total \$</u>
7. <b><u>1 WALK PER DAY (BBSTD):</u></b>	\$5.00	x _____ x	_____	=\$ _____
8. <b><u>2 WALKS PER DAY (BBSTDW):</u></b>	\$10.00	x _____ x	_____	=\$ _____
9. <b><u>MEDICATION (BBMED1):</u></b> (Once a day)	\$2.00	x _____ x	_____	=\$ _____
10. <b><u>MEDICATION (BBMED2):</u></b> (Two times a day)	\$4.00	x _____ x	_____	=\$ _____
11. <b><u>1 EXTRA MEAL (BBSTDF):</u></b>	\$3.00	x _____ x	_____	=\$ _____

12. FEED OWN FOOD- Name of food \_\_\_\_\_ Quantity to feed \_\_\_\_\_  
 Name of food \_\_\_\_\_ Quantity to feed \_\_\_\_\_

**ADDITIONAL CHARGES:**

13. <b><u>DOGS 75lbs &amp; OVER (BB75):</u></b>	\$5.00	x _____ x	_____	=\$ _____
14. <b><u>WEEKEND (FR.-SUN.)(BBWK):</u></b>	\$5.00	x _____ x	_____	=\$ _____
15. <b><u>HOLIDAY (BBSH):</u></b> (Please ask for detailed information regarding yearly holiday dates involved.)	\$10.00	x _____ x	_____	=\$ _____
<b><u>SUBTOTAL</u></b>				=\$ _____

16. **Any known Medical or Behavioral conditions?** \_\_\_\_\_

17. **EMERGENCY TELEPHONE NUMBERS:** 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

(We require that you leave us your number(s) where we can reach you in the event of an emergency.)

**OTHER AUTHORIZED RESPONSIBLE PARTY:** Name- \_\_\_\_\_ Phone- \_\_\_\_\_

*I have today, or previously; read, signed "Authorization and Release Form", which is a permanent part of this current "Admission and Estimate Form."*

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_ SRPH auth: \_\_\_\_\_ / \_\_\_\_\_

**SORRY, WE CANNOT BE RESPONSIBLE FOR PERSONAL ITEMS LEFT WITH YOUR PET. THE PETS ARE MOVED TO CLEAN AREAS FREQUENTLY, AND THEIR BLANKETS, ETC, ARE LAUNDERED FREQUENTLY AS WELL.** \_\_\_\_\_ (owner initial)