

UNIVERSITY PET RESORT

Seizure Form

University Pet Resort cannot guarantee the health of any animal, but pledges to give appropriate care to all boarded pets. By signing below, I agree to hold University Pet Resort harmless for conditions that are often unavoidable in boarding environments. I understand that University Pet Resort is not a 24 hour facility and in the event that my pet has a seizure there may not be anyone present. I understand that medication will be given according to the prescription bottle for an addition \$4.50 a night charge.

Pet's Name: _____ Date of last seizure: _____

Owner's Name: _____

Signed _____ Date _____

I have read, understand and agree to the statements above.