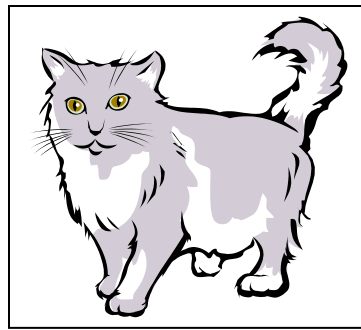




**CAT** Profile and Parent Information



Parent Name \_\_\_\_\_ Cat's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Gender \_\_\_\_\_

Breed \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_ DOB \_\_\_\_\_

Veterinary Hospital \_\_\_\_\_ Phone Number \_\_\_\_\_

Allergies \_\_\_\_\_ Medications \_\_\_\_\_

Flea Control

1. Food Brand \_\_\_\_\_
2. Does your pet engage in any unusual or repetitive behaviors? \_\_\_\_\_
3. Is your pet litter box trained? \_\_\_\_\_
4. Have you ever boarded your cat before? \_\_\_\_\_
5. Has your cat ever bitten anyone? \_\_\_\_\_
6. Does your cat shy away from strangers? \_\_\_\_\_
7. Would you like your cat to have play time in the cat room? \_\_\_\_\_
8. How did you hear about Spa Paw & Tail? \_\_\_\_\_

**Reminders of Policies:**

Please bring litter, food and treats for your cat's stay with us  
If your pet runs out of food or litter during their stay we will provide at a cost to you  
You are 100% responsible for the actions of your cat while in our care. Please disclose all concerns with staff.  
Reservations are not confirmed until all signed documentation and vaccination records are received with a deposit  
No cat will be admitted to Spa Paw & Tail without adequate vaccinations

\_\_\_\_\_  
Parents Signature

\_\_\_\_\_  
Date Signed