

## *Sunnyview Boarding Cattery Booking Form*

### CURRENT INFORMATION ON YOUR CAT

Name of Cat	Age	Sex	Breed/Colour	Neutered Yes/No
1				
2				
3				
4				
5				
Owners Name				
Home Address				
Home Telephone Number/Mobile/Email address				
Address while away – If available				
Date & Time of Arrival			Date & Time of Departure	
Telephone Number while away				
Name of contact available to act on your behalf				
Address and Telephone number of contact				

I have informed my contact about my cats requirements while I am away  
 I agree to my Cats being separated if they don't get on

Yes/No  
Yes/No

### FEEDING AND OTHER REQUIREMENTS

Cat's preferred food during stay (including treats)	
Requirements regarding bedding, cat litter etc. <i>(We use best quality wood-based litter, if this is not suitable please advise which litter you require)</i>	
Special needs re grooming	

### HEALTH STATUS

Name & Telephone number of cat's own Vet

I have informed my Vet that my cat is staying in the cattery Yes/No

Give date and details of recent vaccinations or booster

*Please bring your vaccination record card with your cat – your cat will not be admitted without this being checked*

Card seen Yes/No

Flea treatment used and date last administered

Worming treatment used “ “ “

Other current or recent medical treatment/illness, which may be relevant

Name or type of medication. Dosage amounts and regularity, availability of further supply if necessary

Cat Insurance details : (If held)

Signature of Owner

For marketing purposes, how did you find out about us?

For any additional information please use reverse of form.

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PLEASE DOWNLOAD AND COMPLETE THESE FORMS,

AND POST THEM AS SOON AS POSSIBLE TO:

'SUNNYVIEW BOARDING CATTERY, CHURCH LANE, LYDIATE L31 4HL.'

WITH YOUR 25% DEPOSIT CHEQUE TO CONFIRM YOUR BOOKING.

**AUTHORISATION FOR VETERINARY TREATMENT**

Owners Name.....

Owners Address.....

.....

Cats Name.....

I hereby give permission for worm/flea treatment to be given if necessary.

I agree that in the case of suspected illness. A Veterinary surgeon may be contacted, my cat examined and investigations performed if required (e.g. Blood Tests, X-Rays)

I agree to the cattery administering any prescribed treatments the Vet considers advisable.

I understand that the tests and treatment will be given at my expense.

I also give consent form euthanasia should this be recommended on humane grounds by the Veterinary surgeon caring for my cat, in consultation with my own veterinary surgeon and/or contact person. I have discussed the options for dealing with the cat with the cattery proprietor.

Signed.....

Date.....