

ALL MY KITTIES

3115 S. LANE STREET, SEATTLE, WA 98144
PHONE 206-325-9528, FAX 206-860-8010

Cat & Guardian Boarding Information

Today's date _____
Guardian's name _____
Home address _____
Home phone _____ Cell phone _____
Work phone _____ Other _____
E-mail address _____
Emergency contact name _____
Emergency phone number _____
Veterinarian _____
Vet's phone number _____

Cat information

How many? _____ If more than one, share condo? Y / N
Name (1) _____
Color _____
Long, short, or medium length hair L S M
Identifying markings _____
Age _____ Spayed/Neutered? Y / N De-clawed? Y / N
Indoor Only? Y / N, Social with other cats? Y / N
On any medications? Y/N
If yes, what kind? _____
Instructions on administrating meds and frequency

Type of food (wet, dry, brand name) frequency & other instructions

Can your cat have treats, grass, or catnip? Y / N
Using anti flea treatment? Y / N
Date of last flea treatment _____
What type of kitty litter do you use? _____
Proof of vaccines within last 12 months (copy from veterinarian) for
rabies, FVRCP, and feline leukemia if an outside cat.
Comments: _____

