

Cat Information Form



Date: _____

Cat Name/ Nickname: _____

Breed: _____ Color/Markings: _____

Age/Date of Birth: _____ Sex: M__ F__

REQUIRED: *Spayed or Neutered*

Feeding Instructions & Health History

When is your cat fed & amount @ each feeding?

Dry	AM _____	Mid-Day _____	PM _____
Wet/canned:	AM _____	Mid-Day _____	PM _____

Brand of food(s): _____

Treats? _____

Is your cat given any supplements or medications?

Name:	Dosage:	Frequency:
_____	_____	_____
_____	_____	_____
_____	_____	_____

If there are more than 3 supplements or medications are given, please contact run-a-muk to make accommodations. Additional charges may incur at management's discretion.

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Describe any current or previous health issues we should know about and if any special considerations are required:

Is your cat litter box trained? YES _____ NO _____

Is your cat afraid of anyone or anything?

Has your cat ever been abused? If so, please explain:

Describe what your cat likes (i.e., feathers, balls, bells, scratchers, catnip):

Does your cat enjoy being brushed? YES _____ NO _____

Held or stroked? YES _____ NO _____

What else should we know about your cat to make his/her stay at run-a-muk more enjoyable?

Current Flea/Tick Medication: _____ Date: _____

Note: If you cat is found to have fleas/ticks while in the care of run-a-muk we will administer the appropriate treatment at the owner's expense.

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Feline Vaccinations Required by run-a-muk:

run-a-muk **requires** all boarding cats to have current Rabies and FVRCP vaccinations.

Cats that spend **any** time outdoors must also have proof of their current Feline Leukemia vaccination.

If any of the required vaccinations have been waived, run-a-muk must have a written exemption from the cat's veterinarian.

It is the owner's responsibility to provide run-a-muk with current vaccination records for their cats **prior** to check-in. You may have your vet fax us directly at the time vaccinations are administered.

Please understand that these health requirements are to protect all of our feline guests as well as the run-a-muk staff, and that we are unable to board any cats without current and/or appropriate vaccinations in our files.

Please sign that you have read and understand the above requirements.

Owner Signature: _____ **Date:** _____

Owner name (printed): _____