



Cat Information Form

Date _____

Name; _____ Breed; _____

Nickname; _____ Colour; _____

D.O.B; _____ Desexed; _____ Weight; _____

Is your cat on a; _____ Flea Treatment _____ All-wormer _____

(Note – All pets in our care must be on a flea treatment and be all wormed.)

Have you boarded your cat before: Yes No

Particular habits; _____

What do you feed & how much; _____

Health & Medical history of your cat;

Legs Ears Eyes Mouth/Gums Paws Hips Skin

Lungs Allergies Spinal Past illnesses Past surgery

Please provide information if any of these health issues are relevant to your cat;

Any other information you would like to provide us with; _____

