

BOARDING REGISTRATION



4716 Roswell Rd., NE
 Atlanta, GA 30342
 (404) 257-0048
 FAX (404) 255-1156
www.thecatdoctoratlanta.com

YOUR NAME: _____

EMERGENCY NO: _____

PICK UP DATE: _____ APPROX. TIME: _____

CAT'S NAME(s)		
MEDICATIONS		
DIET (Brand & Flavor)	can dry	can dry
CARRIER	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
TOYS, BLANKETS, etc.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
ADDITIONAL SERVICES	Yes <input type="checkbox"/> No <input type="checkbox"/> Please list: _____ _____ _____	Yes <input type="checkbox"/> No <input type="checkbox"/> _____ _____ _____

Comments and requests:

In order to protect your cat from contagious disease, all cats that board with us must be current on Rabies, Distemper and Feline Leukemia vaccines and test negative for Feline Leukemia prior to or after vaccination. We will make every effort to obtain this information from your previous veterinarian but if it cannot be verified, we will test and/or vaccinate your cat as needed.

If your cat becomes ill during their stay or arrives with a medical issue, we will make every attempt to contact you at the numbers(s) provided prior to treatment. If we are unable to reach you, you authorize The Cat Doctor, Inc. to treat your cat as necessary in our professional judgment and agree to pay all cost associated with such treatment.

I understand and accept the above conditions: _____