

Alford Avenue Veterinary Hospital
Cat Boarding Registration 2022

Client's name _____ Cat's name _____
Breed _____ Color/Markings _____
Cat's gender: ☐ Male ☐ Female Spayed or neutered? ☐ yes ☐ no
Toys or personal belongings _____
Does your cat have any behavioral problems we should be aware of? _____

Emergency contact and number _____

Diet

- ☐ House Chow
- ☐ Therapeutic diet _____
- ☐ Own food _____

Feeding Schedule

- ☐ Twice daily (AM / PM)
 - ☐ Once daily (AM / PM)
 - ☐ Other _____
- How much to be fed? _____

Medication

I have provided my own medications ☐ yes ☐ no Medication name _____ amount _____

Vaccinations

- ☐ Proof of current vaccinations from Alford Avenue Veterinary Hospital
 - ☐ Proof of current vaccinations from another hospital _____
- Date of vaccinations: Rabies _____ FVRCP _____ FeLV _____

For your cat's protection, the Rabies and FVRCP vaccine must be current. We require written proof or phone confirmation by your referring veterinarian of vaccinations, for any cat that stays at Alford Avenue Veterinary Hospital. If you are unable to provide proof of these vaccinations, we will need to give them. We charge \$155 for an adult cat's exam, yearly deworming, Rabies, FVRCP, and FeLV (outdoor and multi-cat households only), \$125 for an exam, deworming, Rabies, and FVRCP, or \$57 for Rabies and FVRCP vaccine only. Your cat must be free of internal and external parasites. **If not, we will treat your cat at your expense.** Please note that many vaccines do not take affect for 10-14 days, so be sure your cat is vaccinated before boarding for optimal wellness.

I agree and understand this policy. _____ (client initials)

Permission to treat: Should my pet(s) become ill, an Alford Avenue veterinarian may provide all medical and surgical treatment deemed necessary in the doctor's professional judgment. I acknowledge that in the event of my pet's illness, the Alford Avenue staff may not be able to contact me immediately and is therefore authorized to initiate appropriate treatment until I (or the pet's agent) can be reached. I agree to pay all related expenses associated with treatment of my pet until I am available to discuss further care and related fees with the attending veterinarian. **If my cat has a serious illness or injury that becomes critical during my absence,**

I want the doctors to: ☐ Resuscitate my cat ☐ Do not resuscitate my cat. I agree to and understand this policy.

Client's signature _____

Date _____

Boarding Fees

- ☐ \$18 night boarding
- ☐ \$2 per day to administer medications once a day
- ☐ \$4 per day to administer medications twice a day
- ☐ \$22 bath for short haired cats
- ☐ \$26 bath for long haired cats
- ☐ \$10-15 to shave a "potty trail"
- ☐ \$20.00 for a nail trim (included with baths)
- ☐ \$10-30 to brush out depending on time required

Veterinary Services

Our doctors can provide veterinary services while your cat stays with us. Please check the services you need and we'll provide an estimate. Let us know each time you board.

Dr. _____

- ☐ Comprehensive physical exam and appropriate vaccinations
- ☐ Fecal test to screen for parasites
- ☐ Feline leukemia/FIV test (especially important for indoor/outdoor cats)
- ☐ Wellness blood test (checks all vital organs for health or signs of disease)
- ☐ Senior blood test for cats 8 years or older
- ☐ Wellness urinalysis to check the bladder, kidneys, and organs
- ☐ Professional dental cleaning