

COZY CAT LODGE

Application

Date: _____ Name _____

Address _____ City _____ Zip _____

Home phone _____ Business phone _____ Email address _____

Emergency contact _____ Your cell _____

Pet name _____ Age _____ Sex _____

Breed _____ Spayed _____ Neutered _____ Pregnant _____

Coloring/distinctive markings _____

Date of birth _____ Most recent weight _____

Personality traits _____

Indoor _____ Outdoor _____ Both _____ Could your cat have fleas? _____

Feeding Instructions _____

Special Services _____

Remarks _____

Medical History

Veterinarian's name _____ Phone _____

Name of flea preventative _____ Date applied _____

Vaccinations (when?) _____ Must provide vaccination record.

Please Complete Additional Information

Referred by _____

Pet date in _____ Date out _____

Signature _____ Date _____