

Forms

Please download the appropriate form(s), open and fill out using Adobe Reader, “save as” your kitty’s name and email back to us.

Thank you!

Cat Nap Inn
And a Beautiful Place to Stay for Cats

At Cat Nap Inn we want to make your cat's visit a fantastic vacation!
Please help us by telling us a little bit about you and your kitty.

General Information

Today's Date _____
Name _____
Name _____
Mailing Address _____ City _____ Zip _____
E-mail Address #1 _____
E-mail Address #2 _____
Home Phone _____
Cell Phone #1 _____ Cell Phone #2 _____
Work Phone #1 _____ Work Phone #2 _____
What is your preferred method of contact? _____
How were you referred to Cat Nap Inn? _____

Emergency Contact

In case we cannot reach you, we like to have two emergency contacts on file. We do not necessarily need these people to live close by, just that you trust these contacts to make decisions on your behalf in the case we cannot reach you.

Emergency Contact #1	Emergency Contact #2
Name _____	Name _____
Relationship _____	Relationship _____
Home Phone _____	Home Phone _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____

Veterinarian's Name, Clinic Name and Phone Number _____

While we cannot promise to take pictures of your cat during his/her stay (as sometimes other matters take priority), if we do get an opportunity, do we have your permission to post those pictures to our Facebook page?
(We promise to never post last names, only your kitty's first name.)

Yes, make my cat a star and I'll share it with all of my friends. No thanks, My cat doesn't like the paparazzi.

Periodically, we send out information about upcoming events, trainings and seminars via e-mail to our clients. May we add you to that list? (Not to be shared with any other organization.)

Yes No thanks

For office use only
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Client since _____

Purrsonality Profile

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Information for guests with a medical condition staying at Cat Nap Inn

For our guests with a medical condition we require the following:

1. A veterinarian's note stating:
 - your cat's medical condition
 - that your cat's medical condition is non-contagious
 - that your cat is healthy enough to board
2. A completed medication form that you will fill out that outlines any medications your cat(s) receives.

It is ideal if we could have both of these documents at least two weeks in advance.

If your kitty is taking a medication, please know that we only administer medication as prescribed by a veterinarian and as indicated on the original container. Bring the medication in the original container with the current and correct instructions. If the dosage has changed from what is printed on the container, please have your veterinarian mail or email us the most current instructions. Also if administering pills, please make sure they are in the quantity needed (i.e. if we are to administer one half tablet, please bring the pills already cut into one half tablets). Please send along additional medication in case your trip is unexpectedly extended.

If you have any questions, please ask!



Cat Nap Inn
Bed & Breakfast Exclusively for Cats
Phone: 350.724.3513
Website: www.catsnapinn.com E-Mail: catsnapinn@catsnapinn.com
Don't miss out; be sure to like us on Facebook!
<http://www.facebook.com/CatNapInn>

6.15

Guests with a Medical Condition

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Cat Nap Inn, LLC
Bed & Breakfast Exclusively for Cats

GUEST MEDICATION INFORMATION

Cat Patient Name: _____ Cat Name: _____ Date: _____

	Name of medication	Dosage	Strength of dose	Frequency	Purpose	How to administer
Example	Propranolol	1/2 Tablet	0.5 mg	Morning only	Inhibit Bowel Syndrome	Orally
Rx 1						
Rx 2						
Rx 3						
Rx 4						
Rx 5						

Do the original medication labels prescribed by my veterinarian match this schedule? Yes No
Do I have a veterinarian note stating that my kitty is stable to board? Yes No

Medication Information

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Information for diabetic guests staying at Cat Nap Inn

Cat Nap Inn accepts diabetic guests that are under veterinarian care and receiving treatment either orally, are insulin dependent or have been determined by their veterinarian to be in remission. Furthermore, we only accept diabetes that are stable/well controlled and have received a "doctor's note" stating he or she is healthy enough to visit. We prefer to receive the doctor's note at least two weeks prior to check in. Unfortunately, we cannot care for newly diagnosed diabetics.

For our diabetic guests, we require the following:

1. A letter from your cat's veterinarian stating he or she is stable/well controlled and is healthy enough to board.
2. For our insulin dependent guests, we need the amount of insulin we are to administer, the frequency and enough syringes for a single-time use for the duration of the stay. Please know that we only administer insulin as prescribed by a veterinarian and as indicated on the original container or in a note from your veterinarian stating the amount of insulin to administer.
3. Extra insulin and syringes in case your trip is extended by a few days.

Please know

We have a very strict medication schedule. We administer medications at 6:30 a.m. and 6:30 p.m. Please let us know if your kitty's insulin schedule varies more than an hour from ours so we can discuss adjusting the insulin well in advance of check in.

We administer a pre-specified insulin dosage as specified by your veterinarian. We do not make the clinical decision of increasing or decreasing insulin dosage.

Additionally, we have found the following tips helpful:

Pack insulin so it is kept cool en route to us. In turn, we will pack it to stay cool en route home. We have found placing ice in a baggie and then in a Tupperware container works well.

If your cat has special dietary needs, please provide us written instructions. It is especially helpful for us to know any treats or food your cat finds irresistible. Feel free to pack along any of these irresistible treats. This helps us in case we need to encourage him or her to eat.

**It is ideal for us to have a doctor's note at least two weeks prior to check in.
If you have any questions, please ask!**

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Website: www.catnapinn.com E-Mail: catnapinn@catnapinn.com
Don't miss out; be sure to like us on Facebook!
<http://www.facebook.com/CatNapInn>

Diabetic Guests

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Donation Request Form

To request an auction donation, please complete the questions below.
This request must be received at least 30 days in advance of event to be considered.
If approved for donation you will be contacted via email.

Donations cannot be mailed and must be picked up at Cat Nap Inn. Thank you!

Name of Organization _____
Address _____ City _____ Zip _____
Tax ID # _____
Website _____
Contact Name _____
Contact Phone # _____
Contact Email _____
Event Name _____
Event Date _____
of Attendees _____

If Cat Nap Inn agrees to make an auction donation, how would it be promoted?
Check all that apply:

- Event Program
- Newsletter
- Literature on Silent Auction Table
- Mailing
- Event Webpage
- Other _____

If selected to receive a silent auction donation, as representative of the above Event/
Organization, I agree to promote Cat Nap Inn as stated above.

Event Representative

Cat Nap Inn 3244 Butler Creek Rd, Sedro-Woolley, WA 98284 (360) 724-3513

Donation Form

Download