

To fill out form electronically: 1) Open in Adobe Reader 2) Fill in the fields 3) "Save As" your last name to your computer 4) Email it to us as an attachment

At Cat Nap Jnn 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 social media? (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 offic	ce use onl	у
T	TY	RTY	FC
Cli	ent sinc	e	

Your Cat's Information

Cat's Name	
	Breed
	Age
Has your cat lived with you for	less than a month? 🔲 Yes 🔲 No
Is your cat litter box trained?	Yes No
your own? Please note if you bring	umping or wood pellets. Which would you like for your kitty or will you bring your own, we strongly prefer unscented litter due to staff allergies. ping Wood My Own (Unscented only)
Check all that describe your cat	's personality
Outgoing	Shy Talkative Submissive
Verbally Sensitive	Social Butterfly Reserved Confident
Timid	Gentle Clingy Easily Over Stimulated
Affectionate	Mouthy Excitable Easy Going
	Other
Describe your cat's activity leve	el Low Medium High
Your kitty is an Indoor	r-only cat 📃 Indoor/outdoor cat.
How would you describe your o	cat's demeanor while riding in a car? 🔲 Enjoys 📃 Dislikes 📃 Neutral
If your kitty has issues with vom withholding food for 1 and w	defecate or vomit while riding in a car? Yes No niting or defecating in the carrier while riding in the car, we have found that 12 hours can help. Will you be withholding food prior to check in ould you like us to do the same before check out?
	es, withhold in and out 📃 No, feed as normal.
Have you ever boarded your ca	
If yes, please describe your cat's	s experience
	Yes No If yes, what brand?
·	hly Seasonally As needed
Is your cat declawed?	Yes, front only Yes, full declaw No
Diet	
	ouse foods (Costco's Kirkland Signature™ Chicken and Rice dry food and texture canned food), it is our preference for you to bring the food your kitty mach and encourage eating.
Will you bring your cat's dry for	od to Cat Nap Inn? 🔲 Yes 📃 No, feed house dry food 🛛 🔲 No dry
	ood to Cat Nap Inn? 🗌 Yes 🔲 No, feed house canned food 🔲 No wet
	own food, what do you feed at home?
amount you would like us to feed and ¹ / ₄ can of my own canned food	wice a day. Please help us by being very specific regarding what and the . Some examples include: " $\frac{1}{4}$ cup of my own dry food for breakfast and dinner d for dinner only" or "please feel free to free feed my kitty."
Breakfast	

Dinner _____

TLC
What would your kitty like for his or her personalized attention? Please note that each guest receives two complimentary love and play sessions daily.
Play Pet Head Rubs Brush Let him/her set the tone Other
Would you like any add-on services? If so, what additional pampering would you like? (Click here to see our <i>Spoil Me Menu</i> .)
Would you like your file marked to automatically get this additional service every visit? 🔲 Yes 🔲 N
We offer many goodies at no additional charge. May your kitty partake in
Hairball Gel Yes No
Catnip Yes No
Treats Yes No Pumpkin Yes No
Wheatgrass Yes No
Medical Needs
Is your cat allergic to any type of food? 🗌 Yes 📄 No
If yes, please describe the allergy and reaction
Does your cat have any medical condition? 🔲 Yes 📃 No
If yes, what medical condition(s) and when was it diagnosed?
Is your cat on any medication(s)? 🗌 Yes 🗌 No (If yes, please fill out the Medication Form on our website.)
Is your cat allergic to any medication?
If yes, please list the medication and describe the reaction.
Does your cat have any old or current injuries or health concerns? Yes No
If yes, please explain and give approximate date of occurrence
Does your cat engage in any unusual or repetitive behaviors?
If yes, please explain
Other Questions or Comments?
Is there anything else we should know about your cat that we have not asked?
Do you have any questions?
Thenk you for taking the time to tall us shout your little Verders since us a hard start and the second
Thank you for taking the time to tell us about your kitty. You've given us a head start on the spoiling

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