

RESORT

Cat Enrollment Application

low did you hear about Woof & Whiskers Resort?	
wner Information	
ame:	
ddress:	
MAIL:	
ome Phone: Cell Phone:	
mergency Contact	
ame: Phone:	
et Information	
ame: Sex: Breed: Sex:	
eutered: Birthdate or Age: Weight:	
eterinarian	
ame:Phone	
et Personality Profile Raised from a kitten Adopted Front Declawed Back Declawed Tadopted, do you have any knowledge of your cat's past history?	_
re there any other animals in your household? If so, please list type, sex and age of each:	_
low does your cat get along with other resident animals? eneral las your pet boarded before? Does your cat like to be brushed? Favorite Petting Spot(s	
eeding	
ood Brand Name(s):	
eedings per day Amount (cups) per feeding	
dditional feeding instructions	
ny Food Restrictions?	

Medical/Health

Conditions:
Allergies or Food Sensitivities:
Medication and Dispensing Instructions:
We sometimes use peanut butter, yogurt or pill pockets to entice our pets to take medication.
Is this acceptable? If not, please advise how you administer medication
Are there any restrictions that need to be placed on activities or movements?
Please note there is a \$1.00 charge per dosage for dispensing medications
Behavior
Does your cat act afraid of any specific items or noises? If so, please explain:
Are there any kinds of people your cat automatically fears or dislikes?
Has your cat every bitten or clawed someone? What were the circumstances?
Does your cat play with toys? If so, what type of toys/games does your cat like?
Has your cat ever been aggressive towards anyone who has taken his/her food or toys away? If yes, what were the circumstances?

Has your cat ever shared his/her food or toys with other animals?

Other comments about your cat which you feel might be helpful

Note: Please visit our Facebook Page and also join our private group Woof & Whiskers Resort Parents and Friends where we post pictures daily of our guests during their stays.