

# **Paws and Claws Care**

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## Cat Booking Info Form

#### Your Details \* Required Information

Owner Name First* Las	t* Title*
Owner Mobile	* Owner email*
Owner Home Phone	* Work Phone
Owner Address (where Cat lives )	Alarm Code
Name/No. Street	*
Town / City	.* County* Post Code
Emergency Contact info ( someone we	e can contact if we can't contact you)
Emergency Contact Name First	* Last* Title*
Emergency Mobile No	*
If on arrival we find a problem at your house	(ie, break in, flood etc) who do you wish us to contact?
	Policy Number
Vet Information	
Vet Practice	*
Vet Address	*
Vet Town / City	* Vet Post Code*
Vet Name*	Vet Phone*
Vet 24 hour Emergency number	*
Booking Details	
First Visit date & time	* Visits per day*
Last Visit date & time	* Visit Times

## Paws and Claws Care Cat Booking Info Form

Cat Details				
Name	Breed	Colour	M/F	Age
Pet Insurance Details	5			
		* Policy No		*
Pet insurance 24hr contact	numher	*		
ret insurance 24m contact				
Spayed/ Neutered ? (Please				
( ) Yes ( ) No (a	nd not going to be	) ( ) No – but will be by booking date		
Do your Cats have access t	o a cat flap? *			
( ) Yes (	) No	( ) No – but will be by booking date		
If yes do you require the ca	at flap to be open a	at all times? *		
( ) Yes (	) No	( ) No – but will be by boarding date		
If no, please confirm what	time of day you re	equire it to be shut?		
Are your cats friendly?		Are they scared of anything (people, thunder, e	etc)	
( ) Yes (	) No	( ) Yes ( ) No		
If yes (scared) please give r	more details			
Other Nature (Quirks, beha	aviours not mentio	oned above)		
Home from Home Ro	outine Info			
Does your cat have a litter		Yes ( ) No		
Please give full details ar kept / how often you wo		n what to feed / quantities / when / Where foo s litter tray cleaned?	od/cat li	tter will be

Any other routines information that you think useful.

## Paws and Claws Care Cat Booking Info Form

#### **Medical and Medication**

Does your cat suffer from any medical conditions - please describe? *
Will you require Paws and Claws Care to administer any medication? - please describe. *
Other information - if we have missed something about your cat that you think might be important, please include this here *
Lieleiling Weigen 9 Delicies
Liability Waiver & Policies:  I understand and agree that in putting my animal(s) in the care of Paws and Claws Care, they have relied on my representation that my animal(s) is/are in good health and has/have not harmed or shown aggressive or threatening behaviour towards any person or any other animal (unless specified).
I further understand and agree that Paws and Claws Care and its staff/associates will exercise due diligence and reasonable care while caring for my pet, and will not be liable for any problems that may arise. I hereby release Paws and Claws Care, it's employees and contractors of any liability of any kind whatsoever arising from my animal(s) being in their care.
I further understand and agree that animals can sometimes receive minor cuts and scratches when outdoors or playing. If an animal becomes otherwise ill or injured and is in need of immediate care, Paws and Claws Care will transport the animal to the closest veterinary centre and attempt to reach the owner while the animal is in transit. If the owner is unreachable, Paws and Claws Care will have the veterinarian proceed with any treatment deemed necessary. Owners will assume all financial responsibility for veterinary treatment via the pets insurance.
I agree for Paws and Claws Care to use photos or video recordings of my animals for marketing or any other purpose.
A 25% deposit is enclosed to confirm initial booking. £
Balance of fees are payable on commencement of the booking.
I have read and confirm acceptance of Paws and Claws Care Terms and Conditions.
Signed Owner Date