



# NARLY OAK BOARDING CATTERY • REGISTRATION FORM

Name of Owner			
Address			
		Post Code	
Telephone No		Mobile No	
Email			

Emergency Contact Name			
Address			
		Post Code	
Telephone No		Mobile No	
Email			

Cat's Name			
Breed			
Colour			
Age/DOB		Sex	
Microchip No			
Wet food		Dry food	
Medication			
Insurer		Vets	
Flea & Worm frequency and product			
Anything to be aware of			

Cat's Name			
Breed			
Colour			
Age/DOB		Sex	
Microchip No			
Wet food		Dry food	
Medication			
Insurer		Vets	
Flea & Worm frequency and product			
Anything to be aware of			
Can this cat share accommodation with your other cat(s)?			

Cat's Name			
Breed			
Colour			
Age/DOB		Sex	
Microchip No			
Wet food		Dry food	
Medication			
Insurer		Vets	
Flea & Worm frequency and product			
Anything to be aware of			
Can this cat share accommodation with your other cat(s)?			

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Booking dates

FROM					TO				
eg 04	10	2020	<input checked="" type="checkbox"/> AM	<input type="checkbox"/> PM	eg 12	10	2020	<input type="checkbox"/> AM	<input checked="" type="checkbox"/> PM
		20	<input type="checkbox"/> AM	<input type="checkbox"/> PM			20	<input type="checkbox"/> AM	<input type="checkbox"/> PM
		20	<input type="checkbox"/> AM	<input type="checkbox"/> PM			20	<input type="checkbox"/> AM	<input type="checkbox"/> PM
		20	<input type="checkbox"/> AM	<input type="checkbox"/> PM			20	<input type="checkbox"/> AM	<input type="checkbox"/> PM

Please mark AM or PM to give an approximate time for entry and exit

PRICES ARE PER DAY AND ARE INCLUSIVE OF THE DAY OF ENTRY AND EXIT

ONE CAT - £8 • TWO CATS SHARING - £12 • THREE CATS SHARING - £16 • FOUR CATS SHARING - £22

Veterinary Permission

- ✓ I give my permission for worm and/or flea treatments to be given if necessary
- ✓ I agree in the case of suspected illness, a veterinary surgeon may be contacted, my cat examined and investigations performed if required (eg blood tests, X-rays and shaving of fur)
- ✓ I agree to the Cattery administering any prescribed treatments the vet considers advisable
- ✓ I understand that any consultations, tests and treatments will be undertaken at my own expense
- ✓ I also give my full consent for euthanasia, should it be recommended on humane grounds by the vet caring for my cat\* in consultation with my own vet and/or named emergency contact
- ✓ I have discussed the options for dealing with my cat with the Cattery
- ✓ I understand that this form covers all visits to the Cattery

\* We will always use your own vet providing that the surgery is a reasonable driving distance from the Cattery (eg Bedford and Kempston)

I CONFIRM THAT I HAVE READ AND UNDERSTOOD THE BOARDING REGULATIONS  
AND ACCEPT THE CONDITIONS OF BOARDING.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Notes:

Office use:

	DB		CA		CH		D
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