



Boarding Form

1450 10th Street S.W. Loveland, CO 80537 **Phone:** 970-669-0815 **Fax:** 970-613-0767

Email: cats@fortheloveofcats.net **Website:** www.fortheloveofcats.net

BOARDER'S INFORMATION					
Cat's Name:					
Drop Off Date:Time:	Pickup Date:Time:				
	re required to be current on their Rabies vaccination & ion, unless exempted by a licensed veterinarian * Date of Last FVRCP Vaccine: Due Date of Next FVRCP Vaccine:				
OWNER'S CONTACT INFORMATION Owner's Name: Address: Best Phone Number to Reach You: Would you like to receive updates regarding your kitty during their stay? Yes, please call me at Yes, please text me at No, thank you					
	aware that this person will be contacted at situation arise & you cannot be reached *				

Best Phone Number to Reach Them: ______

FEEDING INSTRUCTIONS Dry Food Brand:_____ Canned Food Brand: AMOUNT OF DRY FOOD AMOUNT OF CANNED FOOD **BREAKFAST** LUNCH DINNER Treats/Snacks Brand:______ Amount to Feed & How Often:_____ Is it alright to feed your kitty the clinic's in-house Is your kitty allowed to have catnip? **food** if needed? YES NO YES NO MEDICATIONS/SUPPLEMENTS

MEDICATION/SUPPLEMENT NAME	DOSE CONCENTRATION	AMOUNT TO GIVE	HOW OFTEN

RFTONGINGS	(Staff Use Only)
Boarder's Name:	Boarding Kennel:

★ Please list all the items you have brought with you to ensure your kitty's comfort during their stay. Be as descriptive as possible so we can make sure these items are returned to you upon your kitty's departure ★

these items are returned to you upon you		arture *	
I brought with me:	I left with:		
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•			13
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•	_\times		3
•	_\times		
Does your kitty need anything special during their stay? (nail trimming, bloodwork, etc)			(Staff Use Only) Date Completed & Initials
			-



All boarding cats must be current on their Rabies and FVRCP vaccinations unless exempted by a licensed veterinarian.

In the rare and unfortunate event that your cat becomes injured or ill while in our care, your cat will receive any and all medical treatment necessary to maintain his or her health and wellbeing until further instructions are approved by you (or your designated emergency contact as listed on this form).

In the event of escape or theft, we will make any and all reasonable efforts to locate your cat.

In the unfortunate event that your cat becomes deceased while in our care, we will make efforts to contact you for further instructions regarding aftercare. If we are unable to contact you, your cat will be placed on hold in the clinic (no cremation, burial, or necropsy) for 7 days after the scheduled date of pickup from boarding. After this 7-day period, your cat will be (communally) cremated, and you will be responsible for any and all expenses. If you select a necropsy to be performed, this will be completed at Colorado State University's Veterinary Teaching Hospital, and you will be responsible for any and all expenses.

You can contact us at any time to reschedule your pickup date. In the event that your cat is not picked up within 5 days of the scheduled pickup date, and we are unable to contact you, or you have not made contact with us, we will consider your cat abandoned. You will still be responsible for any and all expenses for boarding, and any additional expenses incurred while we are placing your cat in a new home.

If you have brought any belongings from home (blankets, toys, food, etc), please check to make sure all items are returned to you at the time of pickup. Any items left for 7 days after pickup will be donated.

By signing below, you are acknowledging that injury, illness, escape, theft, or death may occur while your cat is boarding with us, and you will not hold any staff member of For the Love of Cats Veterinary Clinic responsible for the outcome of such unforeseen events, and will pay at the time of pickup for all services rendered while boarding.

Owner's Signature	Date	
Signature of Staff Member Completing Check-In	 Date	
Signature of Staff Member Completing Check-Out	 	