

# CAT HOTEL

## MEMBERSHIP APPLICATION FORM



### Cat Details

Name	<input type="text"/>	Breed	<input type="text"/>
Sex	<input type="text"/>	Weight	<input type="text"/>
Birthday	<input type="text"/>	Colour	<input type="text"/>
Microchip No.	<input type="text"/>	De-sexed	Yes <input type="checkbox"/> No <input type="checkbox"/>

### Owner Information and Details

First Name	<input type="text"/>	Surname	<input type="text"/>
Address	<input type="text"/>		
Suburb	<input type="text"/>	Post Code	<input type="text"/>
Home Phone	<input type="text"/>	Mobile	<input type="text"/>
Email Address	<input type="text"/>	Tick if you wish to receive email updates	<input type="checkbox"/>

#### How did you hear about us?

Word of mouth <input type="checkbox"/>	Flyer <input type="checkbox"/>	Magazine <input type="checkbox"/>	Email <input type="checkbox"/>
Internet <input type="checkbox"/>	Vet <input type="checkbox"/>	Other:	<input type="text"/>
Referred by a Pets in the City customer <input type="checkbox"/>	Name of existing customer:	<input type="text"/>	

Do you give us permission to use your cat/s image/s on the Pets in the City Facebook page and promotional material?

Yes  No

### Additional person authorised to pick up your cat

First Name	<input type="text"/>	Surname	<input type="text"/>
Mobile	<input type="text"/>	Relationship to you	<input type="text"/>

### Emergency Contact (if urgent contact is required during the day and you are not available)

First Name	<input type="text"/>	Surname	<input type="text"/>
Mobile	<input type="text"/>	Relationship to you	<input type="text"/>

### Veterinarian Information

Vet Practice	<input type="text"/>	Phone	<input type="text"/>
Address	<input type="text"/>		

Do you authorise us to contact your vet in regards to your cats health and vaccination status?

Yes

No

## Cat Health & Medical (Please tick if yes)

Feline Annual  
Vaccination

Date Received

Date Due

Flea Treatment

Date Received

Date Due

Worm Treatment

Date Received

Date Due

*Please bring along your Cat's Pet Passport on your first visit to Pets in the City to verify vaccinations.*

Does your cat have any medical conditions?

Has your cat have any joint problems

Yes

No

Has your cat ever had any skin problems

Yes

No

Has your cat had any recent illnesses

Yes

No

If yes to any of the above, please provide details

Does your cat require medication during their stay at Pets in the City?

Yes

No

*If yes, please provide the following details:*

Reason for medication

Name of medication

Please provide details for administering medication if required during your cat's stay with us

## Food

*What type of food do you feed your cat?*

Brand

Type of Food

Dry

Wet

Frequency

Quantity

Instructions (e.g feed alone)

## Behaviour/Socialising

Does your cat like to socialize with other cats?

Yes

No

Are you happy for your cat to be let out of his/her condo for free roaming time with other cats?

Yes

No

Is your cat happy to be picked up by strangers?

Yes

No

Does your cat have any unique behavioural or social habits we should know about?

Yes

No

If yes, please explain

Has your cat stayed at a Cattery/Cat hotel before?

Yes

No

If so, how has she/he responded to the change in environment?

Do you have any other special requirements?

## Terms & Conditions of Pets in the City



1. The owner agrees to pay for the full contracted booking, in the event of the pet being picked up before the due date of departure. Peak rates may apply during certain periods. Please ask for details.
2. The booking is not confirmed until the appropriate deposit is paid. In the event of a cancellation the deposit will be held as credit for the next booking.
3. The Owner agrees to pay all costs and charges for special services requested and all Veterinary costs incurred for the pet during their stay.
4. The owner must advise Pets in the City of any medical conditions or temperament issues appertaining to their pet prior to entering the facility. The Owner authorises Pets in the City or the insurer full access to the pet's Veterinary/medical records if required.
5. All pets must be treated for fleas, ticks and worms prior to visiting Pets in the City. If fleas, ticks or worms are present on the pet, Pets in the City reserve the right to treat the pet and charge for the service.
6. The Owner agrees that if the pet becomes ill or injured and in the opinion of Pets in the City requires medical attention, Pets in the City is authorised to engage a Veterinarian (the Owners Vet will be engaged if possible) and administer medicine as directed by the same. All costs incurred are to be paid by the pet Owner upon check out.
7. The pet will not be release to the Owner until all costs have been paid.
8. The Owner must provide documentation that all vaccinations are current according to Veterinarian requirements (including Lepto' and Kennel Cough (12 month) for Dogs). However it must be understood even though all guests at Pets in the City are vaccinated, this may not fully protect your pet. Your Vet will advise further.
9. The Owner understands that Pets in the City operates a communal interactive play group environment and accepts the positive benefits and potential risks involved.
10. Check in and check out is available 7 days a week any time from 7.00am until 7.00pm for the Hotel and 7.00am until 6.00pm for Doggie Daycare. Closed to public Christmas Day, New Years Day and Easter Sunday.
11. The room for your pet is reserved and charges start on the first day of the booking. If the pet is checked out on the last day prior to 11am, that day is not charged. If check out is after 11am a full day is charged.
12. Accepted methods of payment are MasterCard, VISA and Cash. Also direct credit by prior arrangement.
13. Once signed, this contract is valid for all subsequent Hotel and Daycare visits. However the terms and conditions of this contract are subject to change without notice. It is recommended the Owner update themselves on each visit or via our website.
14. Please list medical conditions, temperament issues, feeding or any other special requirements:

**Pets name**

**Family name**

**Signature**

**Today's Date**