



# Paws and Claws Boarding Ltd.

275072 Symons Valley Road

Rocky View MD, T4B 2A3

Alberta, Canada



Date:		New Client (Y/N):		P&C ID #:	
First & Last Name:				Phone #:	
First & Last Name:				Phone #:	
Email:			Email:		
Address:					
Pet Name:			Pet Spayed/Neutered:		
Pet Breed:			Sex:		Age & Birth Date:
Weight:		Colour:			
Veterinarian's Name / Clinic:				Phone #:	
Emergency Contact (other than owner):					
Relationship:				Phone #:	
<b>Vaccinations:</b>					
<i>*Paws and Claws Boarding Ltd. will not board or provide daycare services to any pet without adequate vaccination documentation.*</i>					
FVRCP Vaccination Date:				Expiry Date:	
Please describe any medical or physical problems, including allergies and/or food allergies:					
				Pet Insurance Y/N & #:	
Has your pet had surgery in the past year?:				Details:	
Has your pet been ill in the last 30 days?:				Details:	
Have you brought your own Cat food?				Brand:	
<i>If "NO" please ensure a brand of dog food is selected from our list and be aware a charge will be added to your bill as per list prices.</i>					
What is the measured quantity of food your dog consumes per meal?:					
How many times a day does your Cat eat?:				Any special Feeding Instructions?	

<b>Initial:</b>
-----------------

Cat Questionnaire

Has your Cat ever been boarded in the past (good/bad)?		
Is your Cat a fear biter? ( <i>Will possibly bite under stress</i> )		
How does your Cat react to new people?		
On a scale of 1 - 10, 10 being the highest, what would you say your Cat's anxiety level is in new situations?		
On a scale of 1 - 10, 10 being the highest, what would you say your Cat's aggression level is with new people?		
Any additional information you would like us to know?		
Signature:		Date:
Signature:		Date: