



Wilsonville, Oregon • (503) 682-6700 • www.TheCatnapInn.com



## Guest Registration Form

CAT'S NAME \_\_\_\_\_

BREED \_\_\_\_\_

COLOR/MARKINGS \_\_\_\_\_

AGE OF CAT \_\_\_\_\_

NEUTERED MALE \_\_\_\_\_ SPAYED FEMALE \_\_\_\_\_  
(MUST BE) (MUST BE)

OWNER'S NAME \_\_\_\_\_

OWNER'S PHONE # HOME \_\_\_\_\_ CELL \_\_\_\_\_ WORK \_\_\_\_\_

VETERINARIAN NAME \_\_\_\_\_

VETERINARIAN PHONE # \_\_\_\_\_

ANY MEDICAL CONDITIONS/ALLERGIES \_\_\_\_\_

\_\_\_\_\_

CURRENT MEDICATIONS \_\_\_\_\_

FEEDING SCHEDULE \_\_\_\_\_

INITIAL \_\_\_\_\_ I WANT MY CAT TO FREE FEED.

SPECIAL DIET/NAME OF FOOD YOU ARE BRINGING \_\_\_\_\_

(All cats bring their own food so their diet remains consistent with what they have been receiving at home. A change in food could cause digestive problems.)

### PLEASE BRING:

KITTY'S OWN FOOD OR SPECIAL DIET

VETERINARIAN RECORD THAT SHOWS DUE DATES FOR THE FOLLOWING VACCINES OR TREATMENTS. (KITTIES WILL BE ALLOWED TO CHECK IN AFTER RECORDS ARE SUBMITTED.)

"RABIES" \_\_\_\_\_ "FELV"(FELINE LEUKEMIA) \_\_\_\_\_

"FPRC"(FELINE PANOLUOPENIA RHINOTRACHEITIS CALICI VIRUS) \_\_\_\_\_

"FECAL FLOATATION" \_\_\_\_\_ "FLEA TREATMENT PROGRAM" \_\_\_\_\_



Wilsonville, Oregon • (503) 682-6700 • www.TheCatnapInn.com



## Guest Registration Form

**SUGGESTED ITEMS TO BRING:** BED AND TOYS

PLEASE INCLUDE ANY ADDITIONAL COMMENTS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The owner of The Catnap Inn promises to provide the best care possible by way of monitoring cleaning, feeding and tender loving attention for your precious feline companion. There will be free time in common play area two times per day along with personal interaction with the kitty care provider, (Sidney Adams). I will monitor your cats health and see to prompt veterinary attention if needed.

BUSINESS OWNER \_\_\_\_\_ Date \_\_\_\_\_

By signing below I agree to allow for my cat to be taken to Wilsonville Veterinary clinic for medical attention at my expense, if needed. I will waive all implication of negligence or legal action in the unlikely event of illness or death to my cat while at The Catnap Inn. I will not hold the owner or business of The Catnap Inn liable for circumstances beyond their control.

CAT OWNER \_\_\_\_\_ Date \_\_\_\_\_

*Thank You for Trusting Us to Care for  
Your Favorite Feline Friend!  
Your Kitty Is Very Special to Us As Well!*

