



### Booking Form

Please print off and return to us at Friars Cattery. If you prefer to receive a booking form by post or go through it on the phone please contact us.

Please confirm your booking by completing this form and returning it to Friars Cattery with your deposit of £30 within 4 days of your enquiry. When we have received your completed form and deposit we will confirm your booking by email. (If you would prefer to be notified by post please request when booking).

If you need help or advice with any part of the booking process or information regarding the cattery please contact us.

It would be helpful if you could say where you heard of Friars Cattery? \_\_\_\_\_ Thank you.

#### **Your Details:**

Name:

Address:

Telephone, including mobile please:

Email address:

Admittance Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

Collection Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

If possible an emergency number for you whilst boarding your cat:

#### **Your Emergency Contact:**

Name:

Address:

Telephone, including mobile please:

Email address:

Does your emergency contact have permission to act on the owners behalf?

**Important :** Please complete and sign Vet Authorisation Form on page 4

When you bring your cat to stay please make sure you transport your cat in a secure carrier and remember to bring the following:

- Up-to-date vaccination certificate
- A sufficient supply of prescription food/medication with clear instructions for administering
- Grooming equipment if you would prefer. (Sanitised grooming equipment is available for each cat)
- An item of used favourite bedding/toys (optional but encouraged as the familiar smell will help them settle in)

If boarding more than one cat do you require the cats to share a unit or be separated?

\_\_\_\_\_ Please

note: If sharing a unit and they show signs of not getting on they will be separated for their own safety and welfare. You will be charged for separate units.

**Your Cat's Details – Cat One**

Cat's name: \_\_\_\_\_ Male/Female :

Breed \_\_\_\_\_ Colour \_\_\_\_\_

Description/Features \_\_\_\_\_ DOB \_\_\_\_\_

Last Vaccination/Booster date \_\_\_\_\_

Worm treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Flea treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Microchip number and contact \_\_\_\_\_

Health problems \_\_\_\_\_

Medical requirements \_\_\_\_\_

Food (Brand,quantity,frequency) \_\_\_\_\_

Would you prefer to supply your own food? \_\_\_\_\_

Favourite treats/toys/games \_\_\_\_\_

Information about your cat's likes and dislikes and their personality (the more the better so we can make their stay as happy as possible) \_\_\_\_\_

\_\_\_\_\_

**Your Cat's Details – Cat Two**

Cat's name: \_\_\_\_\_ Male/Female :

Breed \_\_\_\_\_ Colour \_\_\_\_\_

Description/Features \_\_\_\_\_ DOB \_\_\_\_\_

Last Vaccination/Booster date \_\_\_\_\_

Worm treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Flea treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Microchip number and contact \_\_\_\_\_

Health problems \_\_\_\_\_

Medical requirements \_\_\_\_\_

Food (Brand,quantity,frequency) \_\_\_\_\_

Would you prefer to supply your own food? \_\_\_\_\_

Favourite treats/toys/games \_\_\_\_\_

Information about your cat's likes and dislikes and their personality (the more the better so we can make their stay as happy as possible) \_\_\_\_\_

\_\_\_\_\_

**Your Cat's Details – Cat Three**

Cat's name: \_\_\_\_\_ Male/Female :

Breed \_\_\_\_\_ Colour \_\_\_\_\_

Description/Features \_\_\_\_\_ DOB \_\_\_\_\_

Last Vaccination/Booster date \_\_\_\_\_

Worm treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Flea treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Microchip number and contact \_\_\_\_\_

Health problems \_\_\_\_\_

Medical requirements \_\_\_\_\_

Food (Brand,quantity,frequency) \_\_\_\_\_

Would you prefer to supply your own food? \_\_\_\_\_

Favourite treats/toys/games \_\_\_\_\_

Information about your cat's likes and dislikes and their personality (the more the better so we can make their stay as happy as possible) \_\_\_\_\_

\_\_\_\_\_

**Your Cat's Details – Cat Four**

Cat's name: \_\_\_\_\_ Male/Female :

Breed \_\_\_\_\_ Colour \_\_\_\_\_

Description/Features \_\_\_\_\_ DOB \_\_\_\_\_

Last Vaccination/Booster date \_\_\_\_\_

Worm treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Flea treatment used \_\_\_\_\_ Date last treated \_\_\_\_\_

Microchip number and contact \_\_\_\_\_

Health problems \_\_\_\_\_

Medical requirements \_\_\_\_\_

Food (Brand,quantity,frequency) \_\_\_\_\_

Would you prefer to supply your own food? \_\_\_\_\_

Favourite treats/toys/games \_\_\_\_\_

Information about your cat's likes and dislikes and their personality (the more the better so we can make their stay as happy as possible) \_\_\_\_\_

\_\_\_\_\_

**Vet Authorisation Form**

Owner's name:  
Owner's Address  
Owner's phone number :

Emergency contact name:  
Emergency contact phone number :

Owner's vet :  
Vet's name:  
Practice address  
Practice phone number

Cat's name :

Cat's microchip :

- I. I give permission for worm/flea treatment to be given if necessary and have specified which worm/flea treatment was last used by me and when (booking form)
- II. I agree to my cats being placed in separate units if it becomes clear they are not getting on and risk injury to themselves or each other (in which case the suites will be charged at individual occupancy rates)
- III. I agree to give permission to contact the retained vet for Friars Cattery if the proprietor is unable to contact my own vet should my cat show any sign of illness or injury
- IV. I agree to Friars Cattery administering any prescribed treatment the vet considers advisable
- V. I understand that the treatment will be given at my own expense
- VI. I also give consent for euthanasia should this be recommended on humane grounds by the veterinary surgeon caring for my cat, in consultation with me where possible, my own veterinary surgeon and my emergency contact person

Signed :

Date :