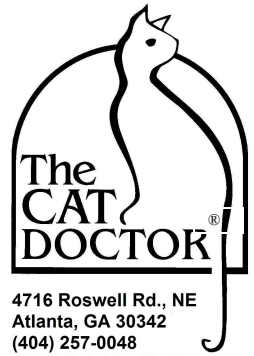


## BOARDING REGISTRATION



4716 Roswell Rd., NE  
 Atlanta, GA 30342  
 (404) 257-0048  
 FAX (404) 255-1156  
 www.thecatdoctoratlanta.com

YOUR NAME: \_\_\_\_\_

EMERGENCY NO: \_\_\_\_\_

PICK UP DATE: \_\_\_\_\_ APPROX. TIME: \_\_\_\_\_

CAT'S NAME(s)				
MEDICATIONS				
DIET (Brand & Flavor)	can dry	<input type="checkbox"/>	can dry	<input type="checkbox"/>
CARRIER	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
TOYS, BLANKETS, etc.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
ADDITIONAL SERVICES	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Please list: _____		_____	
	_____		_____	
	_____		_____	

Comments and requests:

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In order to protect your cat from contagious disease, all cats that board with us must be current on Rabies, Distemper and Feline Leukemia vaccines and test negative for Feline Leukemia prior to or after vaccination. We will make every effort to obtain this information from your previous veterinarian but if it cannot be verified, we will test and/or vaccinate your cat as needed.

If your cat becomes ill during their stay or arrives with a medical issue, we will make every attempt to contact you at the numbers(s) provided prior to treatment. If we are unable to reach you, you authorize The Cat Doctor, Inc. to treat your cat as necessary in our professional judgment and agree to pay all cost associated with such treatment.

I understand and accept the above conditions: \_\_\_\_\_