



New Client Form - BOARDING

It is impor	tant that ALL	questions	on this for	m are answe	ered in fu	II. Plea	ise do not	piece-r	mail information	on.
Yo	ur Name:									
	Street:									
	City:						Zip:			
Cell Phone:					Work	Phone:				
Personal Email:						Home	Phone:			
	Your Vet:					Vet's	Phone:			
Does you	r cell get text	in case of	911?						Yes	No
If so, wit	h photos attac	ched?							Yes	No
If so, wit	h video attach	ned?							Yes	No
Please provide 2 contacts that can decide what to spend, what to do in the event of an emergency if you cannot be reached. Please list someone who does not travel with you & who is willing to make decisions for you. In the event that something happened to YOU, this is also who we will call to re-home your cat:										
	Relationship:						#'s:			
Name & Relationship:						#'s:				
Besides those above, is anyone allowed to visit or pick up your cat (both by appt only please)?										
Name &	Relationship:						#'s:			
	Kitty Nan	ne	Breed	Co	lor	Age	Sex		Fixed?	
Kitty 1:							М	F	Yes	No
Kitty 2:							М	F	Yes	No
Kitty 3:							М	F	Yes	No
Special Loves? (belly rubs, chasing a ball, etc – please use cat's name if more than one)										
Does kitty ever Bite?		Yes	No	Vomit?	Yes	No	Has kitty boarded?	ever	Yes	No
If so, where boarded?				How did kit boarding?	ty do					

	requires all cats	to arrive &	leave in	a proper carrie	r (cardboard Ol	().		
Do yo carrie	ou have a r?						Yes	No
Does	kitty go outside?	Yes	No	Date of last f	lea treatment:			
* We cannot accept cats w/ fleas. People often think their cat is flea-free when they are not – even indoor kitties can have fleas. Please check with a flea comb carefully, or get kitty on a treatment (ie: Advantage) at least 4 days prior to check-in. I your kitty is on a steady monthly treatment they should pass our flea-comb test, no need to double dose kitty.								
Feeding – You provide the food. We provide slide proof bowls and feed 2x's daily. Additional feedings are \$2 per. If different cats have different feeding plans, please use their names. Please be brief, yet specific. Example: AM - feed 1/3 can Fancy Feast per cat, 3 treats per cat and keep dry full all the time.								
AM:								
PM:								
Please	do not put feeding	g instructions	on your	food, use the for	m above - we fee	d off a com	puter only.	
food o	es in environment r human grade me er's chicken or turk	at to entice t						
Does	kitty have food all	ergies or is t	here a co	ncern?			Yes	No
meds, alert K	al Conditions – k \$2 per basic pill o CS at time of bool as a bump on left	r cream. Plea king so we m	se call fo ay discus	r price on sub Q s well in advance	fluids, insulin & o e. Please also mer	ther special ntion anythii	requests. F	Please

How did you hear of us?

Agreements & Release of Liability for Spitfire Agency Inc, doing business as Kitty Charm School (KCS)

Owner agrees that the 50% deposit to block your private room, upon each booking, is NON REFUNDABLE.

Owner agrees that their pet(s) will be in good health, and will not have had any communicable illness of any kind for 30 days prior to each stay. Owner will alert KCS as to all medical conditions and injuries upon each arrival.

Owner agrees that their cat will arrive flea-free, in a secure carrier, with front nail tips trimmed. Pet(s) will be current on FVRCP vaccine, and if allowed outside, pet/s will also be current on Rabies (unless a vaccine exemption from licensed veterinarian has been provided to KCS). Vaccines cannot prevent all communicable diseases, and owner understands and agrees that KCS is a shared-air environment.

Owner deems the KCS accommodations safe. Owner may ask KCS to remove shelves to limit their pet from a potential fall. Owner is aware that pets are not monitored overnight.

Owner understands that KCS are not veterinarians, do not have backgrounds in animal medicine and are not expected to diagnose or detect illnesses in any of the pets staying at KCS. In the event of a concern, Owner agrees that KCS is approved to obtain both non-emergency and emergency treatment and medication for their pet(s) in their absence. KCS may also administer nonprescription medications if needed (ie: flea pill or flea topical, hairball medications, etc). Owner will be responsible for payment as well as any associated costs, such as transportation fees. Owner's credit card(s) may be used to cover all costs.

Owner has read the KCS Boarding Policies, and agrees to all Policies including but not limited to Non Refundable Deposits, Cancellation Fees, Extras & Abandoned Pet Policies. Owner agrees that their cat can be refused, and their deposit forfeited, if they do not follow the Policies and rules above.

I VOLUNTARILY ASSUME ALL RISKS OF ILLNESS, DISEASE OR HARM THAT MAY BEFALL MY PET BY ALLOWING THEM TO STAY AT KCS. I APPROVE USE OF MY CREDIT CARD/S ON FILE FOR MY 50% NON REFUNDABLE DEPOSITS, AS WELL AS THE BALANCES DUE, INCLUDING ANY/ALL EXPENSES ASSOCIATED WITH MY PET'S STAY AND CARE, INCLUDING VET CARE AND EXTRAS, BOTH NOW AND IN THE FUTURE. AS PER KCS' POLICIES AT THE TIME OF EACH BOOKING I MAKE.

Please write: "I AGREE WITH RULES & FEES"	Date		
Owner Signature for Release and Use of Credit Card	Owner Name		
if you do not have a printer, please type your name in agreement above			

YOUR CREDIT CARD IS REQUIRED

A 50% non-refundable deposit will be run at time of each booking. Rooms are not held until credit card information is submitted. If you prefer, you may call your credit card details in, but you must sign above.

Select one:	Visa	Master Card	Diner's Club	(Debit Cards OK)
Card Number:				
Card Expiration:		3 0	Digit Code:	

4.20.15

Return Options: Fax 415-946-3356, email document or photos of document to meow@kittycharmschool.com, or drop in the front door mail-slot of KCS.