

# ***Gone Wild Kennels***

271109, Range Road #50 Rocky  
View County, T4C 2X2

Web Site: [www.gonewildkennels.com](http://www.gonewildkennels.com) e-mail: [cats@gonewildkennels.com](mailto:cats@gonewildkennels.com)

## ***Cat Boarding Application - Tell Us About Yourself***

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell# \_\_\_\_\_

Alt. Cell # \_\_\_\_\_ Email \_\_\_\_\_

Who else is authorized to drop off/pick up the pet(s)? \_\_\_\_\_

### **Please provide an alternative contact name & number other than yourself In Case of Emergency?**

How much do you authorise us to pay ON YOUR BEHALF if your cat becomes ill/injured (we will always attempt to contact you for instruction, but in the event of us not being able to do so it will be helpful). We may have to make the initial decision to seek veterinary assistance on your behalf for your pet's welfare.

Up to \$250 \_\_\_\_ (Initial Consult approx), \$300-\$500 \_\_\_\_, \$500-\$700 \_\_\_\_, \$700-\$1000 \_\_\_\_, \$1000+ \_\_\_\_

In the very unlikely event that your pet passes away whilst in our care, what are your instructions?

Regular Cremation via vet (no ashes):          Cremation via vet WITH ashes:          Retain Pet:

How did you hear about us? \_\_\_\_\_

**Instructions:** If you have more than one cat, each cat does not need a separate form. However, please indicate each vital statistic separately. Attach a separate sheet if necessary.

### ***Tell Us About Your Pet***

Name \_\_\_\_\_ Breed \_\_\_\_\_

DOB/Age \_\_\_\_\_

Sex: Male / Female          Spayed / Neutered: Yes / No\*          *\*No un-altered cats over 6 months old please*

Weight \_\_\_\_\_ Colour \_\_\_\_\_

How does your cat react with other cats in your family that will be boarding in the same condo?

\_\_\_\_\_

How about People? \_\_\_\_\_

Under what conditions does your cat scratch, bite or cry?

\_\_\_\_\_

\_\_\_\_\_

Has your cat ever bitten you or anyone else? \_\_\_\_\_

Has your cat used any boarding facility before ? Yes\* / No

\* If yes, where? \_\_\_\_\_

### ***Tell Us About Your Pet's Health***

Veterinarian: Dr. \_\_\_\_\_ at \_\_\_\_\_ Clinic/Hospital

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Please detail any notable current, prior or recurring medical conditions or issues: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Current Medications & Frequency Administered \_\_\_\_\_

\_\_\_\_\_

Allergies/prohibited foods \_\_\_\_\_

Date of Last Complete Physical Exam \_\_\_\_\_

Vaccination Record (Fill in yourself or have your vet office fax us a copy). **Vaccinations must be completed between 48 hours and 14 days prior to check-in depending on your cat's vaccination history!** Please see the website and Information Sheet for details. Contact us if you are still unsure.

RABIES: Date Administered \_\_\_\_\_ Date Due \_\_\_\_\_

FVRCP: Date Administered \_\_\_\_\_ Date Due \_\_\_\_\_

FelV: Date Administered \_\_\_\_\_ Date Due \_\_\_\_\_

(Rabies & FVRCP (core virus) vaccinations are ESSENTIAL. FelV is Recommended but not essential).  
**Copies of the Vaccination Records AND Flea Control used is ALSO REQUIRED and must remain on site with the animal(s).**

**Flea Control** (ESSENTIAL – ask your vet for advice): Brand: \_\_\_\_\_

Date it will be administered: (ask your vet clinic) \_\_\_\_\_

\*\*\*\* If there is a medical emergency, we use Veterinary Clinics in Cochrane, and a transportation charge of \$20.00 will be incurred for each and every occasion (*including treatment for fleas/parasites*) that we have to take your cat to the Vet. If your pet needs to attend a Calgary facility, this charge is \$40.00. Transportation costs will be added to your boarding bill along with the Vet/Hospital charges.

### ***Tell Us About Your Pet's Daily Routine***

Food: Brand \_\_\_\_\_ Variety \_\_\_\_\_

Feed Times \_\_\_\_\_ Quantity \_\_\_\_\_

Feeding Instructions \_\_\_\_\_

\_\_\_\_\_  
Please bring sufficient food for the stay PLUS a bit extra! And preferably in a marked container(s)

Favourite Activities/Toys/Buzz Words \_\_\_\_\_

\_\_\_\_\_  
Anything else you would like us to know about kitty? \_\_\_\_\_

### ***Agreement***

I certify that I am the owner or agent of the owner of the aforementioned pet, and that I am authorized to board the pet and sign this form. I authorize Gone Wild Kennels to contact my veterinarian in order to confirm health, temperament and vaccinations. I give consent to Gone Wild Kennels to act on my behalf to obtain veterinary care at my expense, should Gone Wild Kennels deem it necessary. I have read this schedule of fees and agree to pay all charges at checkout, unless previously arranged. I release Gone Wild Kennels (and its agents and employees) from any liability or claim due to injury or death of my cat, unless Gone Wild Kennels has been negligent in the care of my cat. I understand that under no circumstances will Gone Wild Kennels be liable for consequential damages or demands beyond the replacement value of my cat.

Signed \_\_\_\_\_ Date \_\_\_\_\_