

**Wayside Kennels & Cattery**

**Tel: 01462 813261**

Chapel Road, Meppershall, Beds. SG17 5NQ

[waysidekennels.cattery@yahoo.co.uk](mailto:waysidekennels.cattery@yahoo.co.uk)



**CAT REGISTRATION FORM**

Owners name.....

Address.....

Post code..... Email.....

Tel. home.....mobile.....

EMERGENCY CONTACT /name/ number (s) .....

**\*\*\*Please note – on rare occasions your emergency contact may be required to look after your pet**

Cats Name.....Breed.....

D.O.B.....Male / Female When in season.....

Cats from the same family will be housed together unless requested otherwise

Cats housed together YES / NO

IS YOUR PET INSURED YES/NO If so – who with.....

MICRO CHIP NUMBER .....

**DIET (please give details of quantity & routine).....**

Whiskas in Jelly/Gravy Whiskas Complete dry Own food wet or dry

Felix in Jelly/Gravy Go Cat Complete Dry

Cats are fed both wet and dry unless requested differently

We are happy to feed supplied food but offer no discount

*Has your Cat attended any other Catteries YES / NO if yes cattery name.....*

*Has your Cat been refused entry to any Catteries – YES / NO If so please explain why.*

**Veterinary Surgeon.....**

Full Vaccinations are required for your pets protection – please ask your vet for guidance

***We reserve the right to refuse entry to any pet, if vaccinations are not complete, correct or up to date. a pet that shows any signs of illness or mistreatment, considered to be too old or fragile for boarding.***

**Annual Booster – Date Given.....Date Due.....**

Feline Panleucopenia // Feline Viral Rhinotracheitis //

Feline Calicivirus // Feline Leukaemia //

**FULL VACCINATIONS ARE COMPULSARY**

**Annual Boosters MUST BE ADMINISTERED 2 weeks before boarding.**

**New Courses for young pets or lapsed vaccinations will take approx 6 weeks – please ask your vet**

**MEDICATION Reason Required.....**

**Details .....**

I have seen / been given and accept the Business Hours and Terms and Conditions

Signed.....

**Additional Comments**