



Island Cats Veterinary Hospital Boarding Profile Form

Cat's Name: _____ Dates of Stay: ____ / ____ / ____ - ____ / ____ / ____ Total Nights: _____
Kitty Condo Card Nights Remaining: _____

Owner's Name: _____ Primary Phone/Email: _____
Co-Owner/Authorized Caregiver: _____ Secondary Phone/Email: _____

EXAM & VACCINES

Exam Due: ____ / ____ / ____ Rabies: ____ / ____ / ____ FVRCP: ____ / ____ / ____ FeLV: ____ / ____ / ____

Additional Notes:

DIET

- Free House Diet *we offer wet & dry Hill's kitten, adult, or senior food
- Food from Home: _____
- Add inventory item to invoice: _____

MEDICATIONS *Medication administration fees are \$6 per night for oral / topical and \$9 per night for injectable

Medication Name	Dose & Frequency	Last Given	Refill?
			Y/N
			Y/N
			Y/N

FLEA PREVENTATIVE

To keep our facility a flea-free, any cat showing evidence of fleas will be treated at an additional cost to be paid at check-out.

Flea Medication used in the last month? Y/N Apply dose (approx. \$22- \$64 depending on treatment type)

NON-MEDICAL SERVICES with Vet Asst/Tech

MEDICAL SERVICES with DVM

KITTY CONDO CARD

- Nail Trim: \$10 - \$20 Microchip: \$37
- Hygiene Clip: \$18 - \$30
- Clip/Shave Mats: \$9.50/ min
- Comb-Out: \$9.50 / min per session

- Wellness Exam: \$75
- Injured/Sick Exam: \$83
- Lab work: _____
- Anesthetic Procedure: _____

- *To be paid at Check-In
- 10-Night Card: \$234 (Save \$26)
- 20-Night Card \$442 (Save \$78)

Your cat's health and safety is of the utmost importance to us, so if during your cat's stay our veterinary assistant caring for your cat notices any indication of illness or instability, a veterinarian will become involved in your cat's care. This includes but is not limited to changes in appetite, coughing, sneezing, vomiting, diarrhea, weakness lethargy, or cats who have not eaten for 36 – 48 hours after offering a variety of stimulating foods. Diabetic, geriatric, obese, or cats with pre-existing conditions may be examined sooner. A \$36 limited boarding exam will be performed and treatment started (costs vary pending treatment). The veterinarian does not directly interact with your kitty unless an exam has been requested by you or the veterinary assistant. We will do everything possible to minimize your costs while keeping your cat healthy and happy in our care.

I would like a call while I'm out of town and treatment is started for my cat. If I am unavailable, leave a message at this #:

I do not want a call while I'm out of town and treatment is started. My cat will receive all necessary care and I will review the care plan upon my return.

I HAVE BEEN INFORMED OF ANY CONCERNS REGARDING MY CAT'S HEALTH AND UNDERSTAND THE ABOVE POLICIES AND AGREE TO PAY AT CHECK-OUT

Signature: _____

Printed Name: _____