

**LITTLE RED DOGHOUSE**  
**320 Northern Blvd.**  
**South Abington Twp., PA 18411**  
**570-586-6364**  
**570-586-6365(fax)**  
**littlereddoghouse.net**

**FELINE GUEST PROFILE**

Owner's Name: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Cat's Information:**

1. Name of Cat: \_\_\_\_\_

2. Name of Cat: \_\_\_\_\_

1.  Male                       Female                       Spayed/Neutered

2.  Male                       Female                       Spayed/Neutered

Does your cat have any allergies or medical conditions we should be aware of?       Yes     No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Is your cat (s) on Flea/Tick and Heartworm control?     Yes     No

**Eating Habits**

Type and Brand of Food: \_\_\_\_\_

How much per feeding: \_\_\_\_\_ How often: \_\_\_\_\_

**Medical Emergency Information**

Veterinarian's Office \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Please attach a copy of your cat's updated vaccinations. Your cat(s) are **required** to be up- to-date on **FVRCP and Rabies** vaccinations before entering our daycare/kennel facilities.

## PLEASE READ AND INITIAL EACH ITEM

**INITIALS** \_\_\_\_\_ All cats must be healthy and current on all vaccinations. You will be required to bring a copy of your cat's updated vaccination records from your vet before you board with us to ensure your cat's safety as well as that of our other guests. Owner also authorizes the release of said pet's medical records from pet's veterinarian

**INITIALS** \_\_\_\_\_ The hours of operation for the Little Red Doghouse Daycare and Boarding are: **Mon-Fri. 7:00AM – 6:00PM; Weekends 7:00AM- 5:00PM.** I agree that management of the Little Red Doghouse retains the right to amend the hours of operation at any time.

**INITIALS** \_\_\_\_\_ I hereby represent my cat(s) is/are of good health and has not had any contagious disease within the last 30 days.

**INITIALS** \_\_\_\_\_ I agree to pick up my cat(s) prior to the Little Red Doghouse's closing time.

**INITIALS** \_\_\_\_\_ The Little Red Doghouse reserves the right to refuse boarding if we believe it is necessary to protect the health and well-being of your cat, other cats, or our staff.

**INITIALS** \_\_\_\_\_ **Owners must provide their own cat food and litter.** Owners are welcome to bring their own bedding or toys if desired, however we cannot guarantee that they will be returned in the same condition.

**INITIALS** \_\_\_\_\_ If your cat becomes ill or if state of your cat's health otherwise requires professional attention, the Little Red Doghouse in its sole discretion, may engage the services of a local veterinarian or provide appropriate medical attention to the animal and any and all expenses thereof shall be paid by the owner.

**INITIALS** \_\_\_\_\_ I am aware that by leaving said pet at the Little Red Doghouse or any other pet facility, said pet is at a higher risk of contracting viruses. While we have taken special care in designing our facility and maintaining a high standard of cleanliness, **no vaccine is 100% guaranteed.**

**INITIALS** \_\_\_\_\_ I further understand and agree the Little Red Doghouse and their caregivers will not be held liable for any problems that might develop with my cat including but not limited to: sickness, disease, injury and death, provided that reasonable care and precautions are followed.

**INITIALS** \_\_\_\_\_ I release, indemnify, and agree to hold the Little Red Doghouse harmless from any and all manner of damages, claims, loss, liabilities, costs or expenses, causes of actions or suits, whatsoever in law or equity, (including, without limitation, attorney's fees and related costs) arising out of or related to the services provided by the Little Red Doghouse.

**INITIALS** \_\_\_\_\_ I understand that Little Red Doghouse Daycare and Boarding fees are non-refundable and non-transferable.

By signing below, you certify that you understand that if in our judgment, your cat requires immediate medical attention and we are unable to reach you, we will take your cat to a veterinarian or animal hospital and acknowledge and you accept exclusive and sole responsibility for all medical expenses for said pet no matter the cause.

By signing this contract you certify that you are eighteen years of age or older and have the legal capacity to enter into a binding contract. You also certify to the accuracy of all information given about your pet. Furthermore, you have read, understood and accept all procedures and policies included herein.

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**Signature (must be original signature, do not fax)**

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**Date**

How did you hear about the Little Red Doghouse?

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Please let us know as we would like to thank them properly.

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