

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Client Release Cat Form

Date: ____/____/20____

How did you hear about us? _____

If you were referred, please let us know as we like to reward our clients.

Your Information

Name: _____ Spouses Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Carrier: _____

Work: _____ Spouses Cell: _____ Spouses Work: _____

Place of Employment: _____

Address: _____

Spouses Place of Employment: _____

Address: _____

Email: _____

Spouses Email: _____

Emergency Contacts

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

Pet Profile

Cat's Name: _____ Breed: _____

DOB: ____/____/20____

Sex: Male [] Female [] Spayed / Neutered: Yes [] No []

Tattoo [] Microchip [] Declawed: Yes [] No []

Coat Color: _____ Weight: _____

Distinguishing Marks or Characteristics: _____

Veterinarian's Name: _____

Address: _____

Phone: _____

Feeding & Medications

Brand of Food: _____ Formula: _____

Wet: [] Dry: [] Other: _____

Amount per Feeding: _____ Per Day: _____

Morning: _____ Afternoon: _____ Evening: _____

Supplements & Medications; Reason, Amount & Time Given: _____

Does your cat have any food or seasonal allergies? _____

Health

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

What is the current health of your cat? Poor [] Good [] Excellent []

Please describe any medical or genetic conditions your cat may have & if any accommodations need to be made? _____

Has your cat been diagnosed with any communicable diseases, bacteria or parasites in the past 30 days? Yes [] No [] _____

Does your cat have a problem with fleas? Yes [] No []

What flea or parasite control do you use? _____

Is your cat an indoor or outdoor cat? _____

Please attach or have your vet email a copy of your most recent vaccinations. We require all cats to be **current** on Rabies & FVRCP. **These vaccinations must be up to date at all times & it is your responsibility to bring us the most recent copies when new vaccinations are given.** We require all vaccinations to be given by a veterinarian. No home vaccinations will be accepted. The state also requires us to have a rabies certificate on file.

If your cat becomes ill or injured while in our care, Morgan's Paws Pet Care Center, LLC will make every attempt to contact you & then the emergency contact. If we are unable to contact you Morgan's Paws Pet Care Center, LLC will reserve the right to administer aid by a veterinarian without liability.

It is the owner's responsibility to inform Morgan's Paws, LLC of any existing health conditions or any new health conditions as they are identified. On admission, all cats must be free from any condition which could potentially jeopardize other cats. Cats that have been ill with a communicable disease in the last 30 days will require veterinary certification of health to be admitted or readmitted.

One form must be completed per pet.

We accept Cash, Visa, Mastercard, Discover & American Express for payment.

Our hours are Monday – Friday from 6:30am – 7pm, Saturday 9am – 4pm, Sunday Closed. Sunday arrivals & departures are by appointment only. We are closed New Year's Day, Easter Day, Thanksgiving Day, Christmas Day, Memorial Day, 4th of July & Labor Day. Christmas & New Year's Eve we close at 5pm. All boarding cats must arrive at least one hour prior to us closing. Any cats arriving after 5pm must first be fed dinner before arriving. Please understand that if you do not

Initials: _____

Morgan's Paws Pet Care Center, LLC
305 Hill Street, York, Pa 17403
Phone: 717-755-9544 • Fax: 717-755-9550
info@morganspaws.com • www.morganspaws.com

pick your cat(s) up by closing that your cat(s) will have to stay another night & you will be charged for that night or you will pay a \$50 fee to pick your cat(s) up within 1 hour after closing time.

Boarding cancellations must be made 48 hours prior to the day of drop off (3days), however, if it falls over a holiday, we require 72 hours' notice prior to the day of drop off (4days). If you plan to pick up your cat early from boarding, you must give a 24-hour notice to not be charged for the remaining nights. Boarding reservations require a deposit to hold a room. We will not hold any rooms until the deposit is made. On the day of departure, you have until 11am to pick up your cat before being charged a pickup fee. If you call to extend your stay by more than one day you will need to pay the current balance up to that day.

All food must be brought in a sealed container with your cat's name on it. If you choose to use our food, there will be a charge per meal. You may bring in any items from home that you would like your cat to have with them during their stay. Morgan's Paws Pet Care Center, LLC will not be responsible for any lost items while your cat is with us.

All cats must be in a carrier when arriving for boarding.

We will post closings or delays due to weather on our Facebook page.

By signing below, you are stating that you have read & agree to the above mentioned information.

Print & Sign

____/____/20____

Date

Print & Sign

____/____/20____

Date

Initials: _____