



# Country Cats Only Hotel

Phone: 226-387-2417

Email: purr@countrycatshotel.com

## Owner Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Home Telephone Number: \_\_\_\_\_  
 Cell Telephone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

## Guest(s) Information

Guest Name	Gender M/F	Age	Breed	Colour	Sprayed/ Neutered	Declawed Y/N

## Return Customers Only

Emergency Contact and Veterinary Information Unchanged? YES \_\_\_ NO \_\_\_ (specify changes)  
 Last Vaccination Date: \_\_\_\_\_ written proof of vaccination required

## New Customers

Emergency Contact Information:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contact Telephone Number: \_\_\_\_\_  
 Contact Email Address: \_\_\_\_\_

Veterinary Information:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_  
 Last Vaccination Date: \_\_\_\_\_ written proof of vaccination required  
 Medical Condition: \_\_\_\_\_  
 Allergies: \_\_\_\_\_  
 Flea Control: Yes \_\_\_ No \_\_\_ Date and Type of Application: \_\_\_\_\_

Food Preferences and Medication  
 Brand Name: \_\_\_\_\_ Dry \_\_\_\_\_ Canned \_\_\_\_\_ Treats \_\_\_\_\_  
 How Often: \_\_\_\_\_ How Much: \_\_\_\_\_  
 Medication(s) Type and Dose: \_\_\_\_\_

## Description of Guest Character:

Guest Name	Short Description of Kitty's Character

Check-In Date: \_\_\_\_\_ Preferred Time: \_\_\_\_\_

Check-Out Date: \_\_\_\_\_ Preferred Time: \_\_\_\_\_