

Date _____

All cats MUST be vaccinated and flea free.



CLIENT INFO:

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ Work _____ Cell _____

E-mail _____

Emergency Contact Name and Phone _____

Name and Phone of person authorized to pick up your cat(s), if applicable _____

Veterinarian _____ Phone number _____

In an emergency, your cat will be taken to the nearest open animal hospital.

CAT CHECK-IN INFORMATION:

Lodging from _____ To _____

Drop-off time _____ Pick-up time _____

Cat Name _____ Long Short or Medium length hair

Color _____ Identifying markings _____

Age / DOB _____ Sex _____ Spayed / Neutered? Yes No

De-clawed? Yes No Indoor Only? Yes No Social with other cats? Yes No

On any medications? Yes No If yes, what kind? _____

Instructions on administrating meds and frequency _____

Type of food (wet, dry, brand name) frequency & other instructions _____

Preferred type of litter _____ Preferred type of litter box Open Enclosed

Using anti-flea treatment? Yes No Date of last flea treatment _____

Date of last vaccines: FVRCP _____ Rabies _____

Include proof of vaccines within last 12 months (from veterinarian).

Cat Name _____ Long Short or Medium length hair

Color _____ Identifying markings _____

Age / DOB _____ Sex _____ Spayed / Neutered? Yes No

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Type of food (wet, dry, brand name) frequency & other instructions _____

Preferred type of litter _____ Preferred type of litter box Open Enclosed

Using anti-flea treatment? Yes No Date of last flea treatment _____

Date of last vaccines: FVRCP _____ Rabies _____

Include proof of vaccines within last 12 months (from veterinarian).

Customer Service Agreement and Waiver of Liability

This is an agreement between Happy Paws Luxury Cat Lodging LLC (hereafter referred to as "Happy Paws") and the Cat Owner _____ (hereafter referred to as "Owner") of the cat(s) named _____ (hereafter referred to as "Cat").

By signing below, in consideration of the services rendered and products provided by Happy Paws to the Cat(s), Owner acknowledges reading, understanding and accepting the terms and conditions herein.

Waiver of Liability: Owner understands that the provision of lodging involves risk and possible injury to Cat(s), including but not limited to exposure to parasites, bacteria, viruses, and other medical conditions passed from cat to cat and from people to cat, sprains, strains, bites, broken bones, fatigue, diarrhea, dehydration, inappetence, nicks, cuts, and even the death of the cat(s). As a result, Owner hereby voluntarily releases, forever discharges and agrees to hold harmless and indemnifies Happy Paws, its owners, agents, employees, successors and heirs, from any and all liability, claims, demands, actions, or rights of action, which are or may be related to, arise out of, or are in any way connected to the provision of service and products to Cat(s) by Happy Paws, including those which may be allegedly attributable to the negligent acts of Happy Paws owners, agents or employees.

Payment: Owner agrees to pay Happy Paws for the services provided to Owner's Cat(s) during each visit, all cost and charges for special services requested, and all veterinary/medical costs obtained for the Cat(s) during the lodging at the sole discretion of Happy Paws, at the rates in effect on the date Cat(s) is checked into Happy Paws at the start of such visit (collectively the "charges"). One half of the anticipated charges for reserved services are due at time of drop-off, with the balance of charges for reserved services and any unexpected services due at pick-up. If Owner returns home early, payment is due in full for the dates reserved and no refund or credit will be issued. All outstanding charges are due and payable upon completion of services, which will be at pick-up. No Cat(s) will be released to Owner until all outstanding charges are paid. A late fee of \$30 will be added to the total payment after five (5) business days, 1-1/2% per month (18% per annual) will be added to balances remaining unpaid in excess of 30 days. There will be a \$30 charge added to any returned checks.

Abandonment: If Owner or Owner's authorized Agent does not pick up Cat(s) on the agreed upon pick-up date, Happy Paws will consider Cat(s) to be abandoned. Abandoned Cat(s) will remain at Happy Paws for three (3) days past the expected pick-up date before being transferred to the humane society or the county sheriff as an abandoned pet, and Happy Paws shall have no further responsibility for the Cat(s). Owner shall remain liable to Happy Paws for all unpaid charges including court costs and reasonable attorney's fees incurred in the collection of the charges.

Photographs: Occasionally, photographs or video footage may be taken of cats that are staying at Happy Paws. Owner gives permission for any resulting photographs or video of Owner's Cat(s) to be used for advertising or educational material, understanding the resulting photographs or videos are the sole property of Happy Paws.

Representations of Owner: Owner hereby represents and warrants that Cat(s) has not been exposed to any contagious diseases within the thirty (30) days prior to arrival at Happy Paws, and that Cat(s) is in good health and that Cat(s) has had the vaccinations required. Owner also agrees to disclose any allergies, conditions, special medications or the like which Cat(s) requires and which could affect the provision of lodging and related products. Finally, Owner represents that Cat(s) is not aggressive and that Cat(s) does not have a history biting people or other animals.

Accepted and agreed to:

Owner Signature _____ Date _____

Emergency Treatment Authorization

I give permission for the owners of Happy Paws Luxury Cat Lodging LLC to administer worm/flea treatment as necessary. I agree that in the case of a suspected illness, a veterinarian may be contacted, my cat examined, and treatment performed if required (for example blood tests or x-rays). I agree to the owners of Happy Paws administering any prescribed treatments the veterinarian considers advisable. I understand that the tests and treatment will be given at my own expense.

Accepted and agreed to:

Owner Signature _____ Date _____