

KITTY DAYCARE ADMISSIONS FORM

As the owner or authorized guardian of this animal, I give permission to the clinic to receive, treat, prescribe, or otherwise care for the animal above as deemed necessary. Should injury or circumstance warrant the need for emergency service, I understand that the clinic will try to contact the necessary people before treatment but will exercise the option to proceed if no one is available for approval.

Emergency Contact Name: _____ Phone Number: _____

****Owner must E-mail, Fax or bring proof of all required vaccinations received from other Veterinary Clinics, Rescues or Animal Shelters. NO owner vaccinations accepted! Records Verified _____ Employee Initials**

1.) All cats must be current on their Rabies and have had at least (2) FVRCP (Upper respiratory) vaccinations.

- if an adult cat and NOT current on FVRCP, then MUST be vaccinated 10 days prior to daycare.

KITTENS: Minimum age to stay in Daycare is 9 weeks old and they must have (2) Upper Respiratory Vaccinations prior to coming in for daycare.

Would you like to have your cat vaccinated for the following during their stay?

Feline Upper Respiratory (\$36.00) _____ YES _____ NO **(Please Initial)** Current _____

Rabies booster (\$17.00) _____ YES _____ NO **(Please Initial)** Current _____

2.) All cats must be on a prescribed flea prevention or will be given a Capstar upon arrival whether fleas are seen or not.

Current Flea prevention _____

Capstar is an oral flea pill that kills all fleas on the animal within 30-45 minutes.

Capstar (\$15.32) _____ **(Please Initial)**

3.) Is your cat on a monthly heartworm preventative? _____ Heartworm prevention

Would you like your cat de-wormed during their stay? _____ **(Please Initial)**

YES, Deworm my cat for Hooks, Rounds, Whips and Tapeworms:

Drontal 1.5 lbs - 8 lbs - (\$8.97) _____

Drontal 9 lbs - 12 lbs - (\$13.46) _____

Drontal 13 lbs - 16 lbs - (\$17.94) _____

4.) Medications given to pet while at Daycare. Bring ALL your cat's medications in ORIGINAL bottles with a list of how much and when you give each one to help ensure they are given properly.

A charge of \$2.00 will be applied to your bill for Medications given to your pet. _____ **(Please Initial)**

LIST ALL MEDICATIONS:

5.) I give consent to Gatesville Animal Clinic to take and post pictures of my pet to social media and/or website.

Accept _____ Decline _____

EXTRAS:

Afternoon treat	\$3.00 _____ (Initial for Extra)
Extra Playtime (15 minutes)	\$10.00 _____ (Initial for Extra)
Video Call (10-15 minutes)	\$10.00 _____ (Initial for Extra)
Extra Love/Brush time (15 minutes)	\$10.00 _____ (Initial for Extra)

Bargain Bundles: Please Initial one to start saving!

5 pack (5% savings when you prepay for 5 Full Daycare sessions) _____ (Initials)
10 pack (10% savings) _____ (Initials)
20 pack (20% savings) _____ (Initials)

OUR DAYCARE POLICY:

In order to give each and every one of the cats the time and care they need our Daycare Check-In and Pick-up times are as follows:

FULL DAY: Check-in at 8:00 am and Pick-up at 5:00 pm

** includes FREE afternoon treat

1/2 DAY: Morning Check- in at 9:00 am and Pick- up at 12:00 pm

Afternoon Check- in at 2:00 pm and Pick- up at 5:00 pm

NOTICE: 1/2 Day Daycare cats must Check-Out (picked up) by 1:00 PM for morning
and 5:00 PM for the afternoon.

**A \$10.00 fee will be added for late pick-ups. _____ (Please Initial)

** You may request an early Check-in at 8:00 am for 1/2 day Daycare for an additional \$3.00 _____ (Please Initial)

NOTICE: Daycare is not available during specific holiday weeks in order to leave sufficient space for Boarders.

We strive to provide your cat a stress-free day out, filled with fun and lots of special attention.

We appreciate your cooperation and understanding of our policies to provide a fair and timely service to all.

I have read and understand all of Gatesville Animal Clinic's policies regarding the care of my animals during their stay.

SIGNATURE: _____ DATE: _____