

Client's Name: _____

Text: (310) 463-2627 (In Case of an Emergency Please Call)

Email: woofpurrla@gmail.com • Website: www.woofpurr.LA

CAT SITTING INFORMATION SHEET

• Woof-Purr LLC Only Cares for Indoor Cats •

Please fill out a form for each cat so that we may provide the best possible care for your pet. Thank you!

Name of Pet: _____ Breed: _____ Color: _____

Markings: _____ D.O.B. : ____/____/____ Gender: M / F

Microchipped: Yes / No Microchip number: _____ Spayed/Neutered: YES / NO

Microchip company: _____ Company Phone #: _____

Aggressive: YES / NO If yes, please explain: _____

Precautions (i.e. afraid of...): _____

Does the cat try to bolt out the door? YES / NO Anything else we should know: _____

Medications: YES* / NO

*If yes, please fill out Medication Waiver Form

Vaccinations Current: YES / NO

Vet has current CC on file: YES / NO

Feeding time(s): _____ Food location: _____

Instructions for food/treats: _____

Caged / Run of the House / Outdoors / Limited to: _____

Collar description: _____ Location of carrier: _____

Litter box location: _____ Supplies/litter location: _____

Hiding places: _____

How to coax out of hiding: _____

Favorite toys/games: _____

By signing below the Client has entered the above information as completely and accurately as possible.



Client's Signature

_____/_____/20_____
Date

If anything changes, please notify us immediately by email along with a note left in an agreed area in your home.

This form will be kept on file for all future visits.