

**Belt Road Cattery** 

124 Belt Road Cattery New Plymouth 4310 Phone: (06) 758 4488

Email: <a href="mailto:info@beltroadcattery.co.nz">info@beltroadcattery.co.nz</a>
Web: <a href="mailto:www.beltroadcattery.co.nz">www.beltroadcattery.co.nz</a>

## **NEW CLIENT FORM**

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Title	Mr	Mrs	Miss	Ms	Dr	Other	
Name							
Address							
							Post code
Home Phone (	)			Work			Mobile
Email	<i>,</i>						
Booking Date							
Check in Date:		/20			8ar	n to 9am	4.30pm to 5.30pm
Check out Date: Please note wee		ours: S			g 8-9am	-	4.30pm to 5.30pm  aturday afternoon  Closed Sunday morning. See T's & C's for holiday hours
Daily Rates  Semi Commi	unal	1 cat	\$1	8.50 per	cat		
Family Cond		1 cat 1 cat 1 cat	\$2	3.50 6 m \$30 pe			Xmas/New Year & Easter Year & Easter
		2 cats	\$1	9.50 per	cat		
		3 cats	\$1	6 per cat			
Should your cat it All prices subject	_			-	ing at th	e cattery there	is an additional charge
My Cats Detai	ils						
Cat 1 Name						Age (DC	DB)
Sex		Ма		Female	)	Desexed	
Microchipp Breed		Ye		No			p number
Cats Perso							ocial / Difficult / Aggressive with cats
Cat 2 Name						Age (or	DOB)
Sex:		Ma		Female		Desexed	•
Microchip	oed	Ye		No			p number
Breed							
Date of yo	ur cat's	last vacc	inatio	າ			
Cats Person	onality	Friendly	/ / Ind	ifferent /	Shy / N	Nervous / Uns	ocial / Difficult / Aggressive with cats
Please ensure yo	ou bring y	your cat's	curren	t vaccina	tion reco	ords with your c	at. Cats must be fully vaccinated and de-sexed (see T's & C's
We provide Ro	yal Cani	in biscuits	s whic	h are pr	emium	quality, vet re	commended biscuits.
My cat usually					,		
I will provide the							If you prefer us to feed your cat with wet food or a food of
your choice you	are most	welcome	to prov	ıde this l	but we d	o not discount f	or this.



Your Vet	terinarian's Details		
Clinic Nan	ne		
F [2]	Has your cat ever had any illness or health issues eg Sneezing / Eye discharge / Cat flu / A Heart / Kidney / Thyroid / Ringworm / FIV+ / other Details	Yes 	No
• Is	s your cat currently on or recently been prescribed any medication by a Veterinarian?:  Please give details of medication and if cat will need medicating at the cattery	Yes	No
• S	Should your cat get sick or pass away in your absence would you like to be contacted?	Yes	 No
Cattery	History		
Has your	cat been in a cattery before? Yes No		
If yes, ho	w did they cope with being with other cats?		
Were the	re any issues we need to know about?		
Emerger	ncy Contact Details		
	upply the name and contact details of a person authorised (other than yourself) to collect y sions relating to the wellbeing of your cat.	our ca	at or to make
Name:	Address:		
Home Ph	one ( ) Work Mobile		
How did	you hear about Belt Road Cattery?		
Paymen	t en		
Belt Road Balance	uld like to do internet banking please enter your <u>name</u> in the reference.  d Cattery bank account number <b>15-3949-0452082-10</b> of payment is now payable at <u>check in</u> by EFTPOS, cash, credit card (surcharge applies) of is not available.	or inter	rnet banking
-	ing my cat into Belt Road Cattery I am agreeing to the Terms and Conditions and an nich are made from time to time.	y cha	nges to

Date .....

Signed .....