



## Cat Profile

### Pet-Fit Resort, Inc.

#### Information:

Name: (last) \_\_\_\_\_ (First) \_\_\_\_\_

Phone Numbers : ( \_\_\_\_\_ ) (h) ( \_\_\_\_\_ ) (c)

Email address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Cats Name: \_\_\_\_\_ Sex \_\_\_\_\_

Spayed \_\_\_\_\_ Neutered \_\_\_\_\_

Primary Breed: \_\_\_\_\_

Color \_\_\_\_\_ Approximate Weight \_\_\_\_\_

Cat's Birthday: \_\_\_\_\_

Has your cat lived with you for less than a month ? Y es \_\_\_\_\_ No \_\_\_\_\_

Emergency Contact: (Name) \_\_\_\_\_

(Number) \_\_\_\_\_

Veterinarian's Name, Address and Phone : \_\_\_\_\_

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## Diet:

Will you bring your cat's food ? Yes \_\_\_\_\_ No \_\_\_\_\_

How many times a day would you like your cat fed? 1x per day / 2x per day / 3x per day

## Medical:

Is your cat allergic to any type of food? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please describe the allergy and the reaction:

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Is your cat allergic to any medication? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please list the medication(s) and describe the reaction (s):

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Does your cat have any old or current injuries or health concerns? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain:

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Is your cat taking any medication? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please name the medication(s) and the reason (s):

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Does your cat engage in any unusual or repetitive behaviors? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, please explain:

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## Behavior:

Is your cat litter box trained? No \_\_\_\_\_ Yes \_\_\_\_\_

Mark all answers that describe your cat's personality: Outgoing \_\_\_\_\_ / Verbally sensitive \_\_\_\_\_ /  
Timid \_\_\_\_\_ / Affectionate \_\_\_\_\_ / Pushy \_\_\_\_\_ Independent \_\_\_\_\_ Reserved \_\_\_\_\_ Confident \_\_\_\_\_  
Submissive \_\_\_\_\_ Clingy \_\_\_\_\_ Excitable \_\_\_\_\_ Playful \_\_\_\_\_ Gentle \_\_\_\_\_ Mouthy \_\_\_\_\_

Describe your cat's activity level: Low \_\_\_\_\_ / Medium \_\_\_\_\_ / High \_\_\_\_\_

How would you describe your cat's demeanor while riding in a car? Enjoys \_\_\_\_\_ / Dislikes \_\_\_\_\_  
/ Neutral \_\_\_\_\_

Does your cat defecate or vomit while riding in a car? No \_\_\_\_\_ Yes \_\_\_\_\_

Have you ever boarded your cat before? No \_\_\_\_\_ / Yes \_\_\_\_\_ If yes, please describe your cat's  
experience:

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