



Boarding Agreement

Fully completed and signed.

Number of Cats: _____

Payable by check with Texas Driver's License or cash only. We do not accept Credit or Debit cards.

Cat Owner's Name: _____

Address: _____

Address Line 2: _____

City/State/Zip _____

Home Ph: _____ Work Ph: _____

Cell Ph: _____ E-Mail: _____

Emergency Contact Number _____

Emergency Contact Name: _____

Is this your first time boarding with us? _____ Yes _____ No

Please tell us how you found out about us.

Internet search _____ Found website another way _____

Referred by: _____ Other: _____

Please Note: Bring proof of vaccinations when dropping off your cat(s). Feline

Leukemia vaccinations are not required as intimate contact with others' cats not allowed.

Cat # 1. Name: _____ Age: _____ Color: _____
Breed: _____ Sex: M ___ F ___ Spay? _____ Neuter? _____

Cat # 2. Name: _____ Age: _____ Color: _____
Breed: _____ Sex: M ___ F ___ Spay? _____ Neuter? _____



Cat #3 Name: _____ Age: _____ Color: _____

Cat #4 Name: _____ Age: _____ Color: _____

Method of flea control: _____ Does cat sneeze or cough? Yes No
If yes, how long have symptoms been present? _____

Is your cat on any medications? Yes No
If so, list name and dosage amounts _____

Is your cat declawed? Yes No

Is your cat chipped? Yes No
If so, where? _____

Is your cat on a special diet? Yes No
Diet instructions _____

(We ask that you provide your cat's normal food in order to avoid digestive upset by switching food.)

Does your cat have an eating routine? Yes No
If so, please describe: _____

Please provide and additional comments or instructions below:

Your Veterinarian's Name: _____
Vet address: _____ City _____ State _____ Zip _____
Vet Ph. # _____ Rabies expiration date: _____
FVRCP expiration date: _____

Please choose among the following options provided below should emergency care be required for your cat and/or write any special instructions below.

I understand that any emergency treatment is at my expense either by prior credit/debit card arrangement with my vet or by use of arrangements I make with my vet or emergency alternative vet by phone upon my being notified of the need for emergency services. Pawz with Us will make all reasonable attempts to reach me by phone, I agree to respond as soon as possible to that call to give consent to care/and or payment. If I cannot be reached, I understand that I will be responsible for necessary vet care payment. Vet may or may not



perform care without prior payment arrangements. We (Pawz with Us) will perform any emergency aid that we are qualified to give while contacting vet and/or transporting to vet in order to help your cat as quickly as possible but will not act if it risks further harm to any cat and will wait for vet in that case.

If expenses to treat my cat would exceed the amount I authorized, I accept that no further treatment will be rendered and any adverse consequences caused by that are understood.
Initials: _____

I authorize Pawz with Us to transport my cat if he/she needs, in the opinion of Pawz with Us, emergency care by my vet or an emergency vet should your vet be unavailable at the time or is too far for timely treatment to be had. (There will be no charge to transport your cat(s).)

Initials_____.

My cat will be boarding at Pawz with Us, located at:
4088 Teas Nursery, Conroe, Texas 77304 from: / / to / /

Release of Liability and Indemnification

You release Pawz with Us, indemnify, and hold same harmless from any and all manner of damages, claims, losses, liabilities, costs or expenses, causes of action or suits, whatsoever in law or equity (including, without limitation, attorney's fees and related costs) arising out of or related to the services provided by Pawz with Us except which may arise from the sole gross negligence of Pawz with Us :

Any action by either party which is in breach of the terms and conditions of this agreement, gives one or more parties in this agreement rights of redress under the laws of the State of Texas.

This agreement covers the current relationship between Pawz with Us, A Luxury Feline Resort & Hotel and yourself. You affirm the terms of this agreement and the truthfulness and accuracy of all statements you make in this agreement.

Signature_____Date_____



Pawz with Us _____ **Date** _____

Check In/Check Out time: 1 p.m. to 6 p.m. Monday - Saturday. Holiday Hours: 2 p.m. to 6 p.m.

YOU WILL BE CHARGED FOR WHATEVER TIME YOU RESERVED IF YOU CHOOSE TO PICK UP EARLY