



Kitty Corner Boarding Service, LLC

kittycornerboarding@gmail.com

1 (864) 990-3056

Admission Questionnaire

Cat's Name: _____

Is your cat up-to-date on core vaccinations? Y N

~~~~~Please send vaccination proof to our email.~~~~~

Is your cat displaying any signs of illness (i.e. wheezing, runny nose or eyes, itching, vomiting, diarrhea, sneezing, coughing)?    Y            N

Does your cat spray?    Y            N

Can your cat be handled safely?    Y            N

Is your cat at least 12 weeks of age?    Y            N

What flea prevention is your cat on and when was it last administered?  
(Note: Penalty fee of \$50 will be issued in the event that fleas are discovered after admission)

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Catio Access?    Y            N

Pamper Package?    Y            N            (+\$2/day; includes daily brushings, mid-day snacks/treats, access to the common areas and interactive play)

Do you wish to receive updates on your cat(s) while you're away?  
Y            N

If so, what is your preferred email? \_\_\_\_\_

Type of Enclosure:    **Medium (Singular)**                      **Large (Singular)**

**Medium (Shared)**                      **Large (Shared)**

Drop-Off date: \_\_\_\_\_ Drop-Off time: \_\_\_\_\_

Pick-Up date: \_\_\_\_\_ Pick-Up time: \_\_\_\_\_

*\*Note: Pick-ups after 11 AM will result in \$30 Late Fee\**

|                                                             | AM | PM |
|-------------------------------------------------------------|----|----|
| Food (type/amount)<br>Treats *(Pamper Package Only)*        |    |    |
| Medication (name, dosage,<br>and reason) <b>*Oral Only*</b> |    |    |

\*Are there any special instructions or things you'd like us to know?

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