



2073 Western Avenue  
Guilderland, NY 12084  
3258 Route 9  
Saratoga, NY 12866  
(518) 869-5779

## Boarding Admission Sheet

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Cats' Name: \_\_\_\_\_

Dates Boarding: Arrival: \_\_\_\_\_

Departure: \_\_\_\_\_

Current Medication (*if applicable*):

<u>Medication</u>	<u>Dosage</u>	<u>Times per day</u>	<u>Time of last dose</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

I understand that I will be charged for flea medication and a dose will be applied if evidence of fleas is found on my cat today. Initial: \_\_\_\_\_

Date of last flea medication treatment (*if applicable*): \_\_\_\_\_

Food client provided: \_\_\_\_\_  
(Please list specific feeding instructions). \_\_\_\_\_  
\_\_\_\_\_

I understand any items left at Just Cats (*i.e. toys, towels, etc.*) may not be returned. Initial: \_\_\_\_\_

Items left: \_\_\_\_\_  
\_\_\_\_\_

If you would like a photo of your cat(s) while boarding, please indicated how you want to receive it

Text \_\_\_\_\_

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

I (*print your name*) \_\_\_\_\_ give the personnel at Just Cats Veterinary Clinic, P.C. the authorization to perform medical procedures needed to stabilize my cat in the event that a life-threatening situation arises and I am unreachable.

Contact number(s) in case of an emergency: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_