



**Condo Admission Form**

Client name: \_\_\_\_\_ Pet's name: \_\_\_\_\_ Client #: \_\_\_\_\_  
Check In Date: \_\_\_\_\_ Check Out Date: \_\_\_\_\_

**For your pet's protection, all vaccines must be current.** If not, vaccines will be done, and fees will be applied. Please provide proof of vaccination if not administered at the Victoria Veterinary Clinic.

**Our deluxe accommodations include an airy and spacious suite complete with different levels to perch on and a cat house for quiet time. We also include maid service twice a day and access to the playroom where they can play with toys or just lounge on the chair in front of the fish tank.**

**Feeding Schedule**

Brand of Dry Food \_\_\_\_\_ Amount fed in AM \_\_\_\_\_ PM \_\_\_\_\_ Last Fed \_\_\_\_\_  
Brand of Can Food \_\_\_\_\_ Amount fed in AM \_\_\_\_\_ PM \_\_\_\_\_ Last Fed \_\_\_\_\_  
Brand of Treats \_\_\_\_\_ Amount fed in AM \_\_\_\_\_ PM \_\_\_\_\_ Last Fed \_\_\_\_\_

**Medication Schedule**

Medical condition(s) \_\_\_\_\_  
Medication A \_\_\_\_\_ Amount given in AM \_\_\_\_\_ PM \_\_\_\_\_ Last given \_\_\_\_\_  
Medication B \_\_\_\_\_ Amount given in AM \_\_\_\_\_ PM \_\_\_\_\_ Last given \_\_\_\_\_

\*Additional fees will apply if medications are needed.

Articles that you brought \_\_\_\_\_  
Additional information or comments \_\_\_\_\_

**Daily Rates**

- Standard Condo \$18.60 per day Rate for one cat
- Luxury Condo \$23.30 per day Rate for one cat
- Each Additional Cat Sharing a Condo \$12.60 per day Rate for one cat
- Medications (oral/topical)/Raw Diet \$4.80 per day Rate for one cat

**Additional Options**

- Pedicure \$13.70 per cat Rate for one cat
- Pedicure with Soft Paws (Soft paws sold separately) \$30.50 per cat Rate for one cat
- Feliway diffuser placed in condo to provide your cat with extra calming comfort. \$2.40 per day

Please provide a contact person(s) in case of an emergency or any questions regarding your pet while boarding. This can be yourself, a friend or family member.

**Contact Person**

Name: \_\_\_\_\_  
Phone Number(s) \_\_\_\_\_ Call \_\_\_ or Text \_\_\_  
Email \_\_\_\_\_

Provide the name of person picking up or coming to visit your pet if other than yourself \_\_\_\_\_

**\*\*If my cat requires Doctor's attention, I give permission for the following:**

Provide treatment Yes \_\_\_ No \_\_\_ Up to \$ \_\_\_\_\_ **OR** Call the emergency contact listed above \_\_\_\_\_  
Preferred Veterinarian \_\_\_\_\_

Owner's signature \_\_\_\_\_ Date \_\_\_\_\_