

# The Cat's Whiskers



## Authorisation for Veterinary Treatment

I agree that in the case of illness or suspected illness, a Veterinary Surgeon will be consulted and if necessary will be called in to carry out such treatment as he considers advisable at my expense. (Where possible we will contact your own vet as they will have access to your cat/s medical history details).

Your Vet \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Telephone \_\_\_\_\_

Please ensure you have an undertaking with your vet that while your cat/s is/are boarding with us you will settle any bill on your return with them.

Whilst every care and precaution is taken by the management of **The Cattery** responsibility can only be accepted at the owners' risk.

Cats Name \_\_\_\_\_

Cats Name \_\_\_\_\_

Cats Name \_\_\_\_\_

(I agree to let my cats be housed in the same house while at The Cattery)

Owners Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

This authorisation will be kept on file for future stays that your cat/s may take with us.