

Office: 730-4616

**Hanover Your Pet, LLC**  
**8533 Meadowbridge Road**  
**Mechanicsville, VA 23116**  
Daycare/Boarding/Grooming

Fax: 730-6598

### Cat Boarding Application

Client Contact Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone# \_\_\_\_\_ Fax # \_\_\_\_\_  
(other than yourself)

Cat Information: (1)

Name \_\_\_\_\_ DOB \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_

Neuter Date \_\_\_\_\_ Spayed Date \_\_\_\_\_

All cats boarded must have current shot records for Rabies, Feline Distemper and Feline Leukemia.

Does your pet take any medications or have any medical conditions? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please describe: \_\_\_\_\_

Veterinarian \_\_\_\_\_ Phone \_\_\_\_\_

Name of Person authorized to pick up your cat. \_\_\_\_\_

Is your cat accustomed to being in a crate or kennel? Yes No

Do you object to us giving your cat treats? Yes No

If yes, explain \_\_\_\_\_

Does your cat have any allergies? Yes No

How did you hear about Hanover Your Pet? \_\_\_\_\_

Please sign Daycare/Boarding/Grooming Waiver

**ABKA Member**  
(American Boarding Kennel Association)

## Cat Boarding Application

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Male \_\_\_\_\_ Female \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_

Neuter Date \_\_\_\_\_ Spayed Date \_\_\_\_\_

All cats boarded must have current shot records for Rabies, Feline Distemper and FIV/FELV Test.

Does your pet take any medications or have any medical conditions? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please describe: \_\_\_\_\_

Veterinarian \_\_\_\_\_ Phone \_\_\_\_\_

Name of Person authorized to pick up your cat. \_\_\_\_\_

Is your cat accustomed to being in a crate or kennel? Yes No

Do you object to us giving your cat treats? Yes No

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Does your cat have any allergies? Yes No

Please sign Daycare/Boarding/Grooming Waiver

**ABKA Member**  
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In accordance with the Virginia Comprehensive Animal Laws, we are required to provide you with this notice each time your pet visits with us. Please read and sign below indicating you are aware of this information. We will keep this copy on file in lieu of having you sign one each time you visit us.

## **NOTICE**

Article 3.1 Section 3.1-796-83:1, If an animal becomes ill or injured while in the custody of the boarding establishment or groomer, the boarding establishment or groomer shall provide the animal with emergency veterinary treatment for any illness or injury occurring while the animal is in the custody of the boarding establishment or groomer. The boarding establishment or groomer shall pay for veterinary treatment of any injury that the animal sustains while at the establishment or under the care or custody of a groomer if the injury resulted from the establishment's or groomer's failure, whether accidental or intentional, to provide the care required by Article 3.1 Section 3.1-796.68; however, boarding establishments and groomers shall not be required to bear the cost of veterinary treatment for injuries resulting from the animal's self-mutilation.

Hanover Your Pet, LLC and our employees pledge to provide the best possible care for your pet. As you know, some pets are unpredictable and the unexpected may occur. Therefore, by signing below, you waive and release Hanover Your Pet, LLC, its employees, owners and agents from all claims which may result while your pet is on the property of Hanover Your Pet, LLC, including, but not limited to, any injury or damage resulting from the action of any pet, including my own. I further agree to pay any veterinarian /medical expenses incurred as a result of injury caused by my pet. I also give Hanover Your Pet, LLC permission to seek veterinary care for my pet at my expense at the veterinarian of your choice if you deem it necessary. However, I will not hold Hanover Your Pet, LLC responsible if it fails to seek veterinary care for my pet.

Hanover Your Pet, LLC reserves the right to refuse any of our services to your pet.

If you are unable to keep your reservation or appointment, please notify us within 24 hours to avoid a cancellation charge. This charge will be \$10.00 per day for each day not cancelled.

Signature \_\_\_\_\_ Date \_\_\_\_\_