

PET PROFILE: CAT(S)

Cat Name:	Description:	Color:	M or F:Age:
Cat Name:	Description:	Color:	M or F:Age:
Cat Name:	Description:	Color:	M or F:Age:
Where did you acquir	re your pet(s): Breeder Res	scue/Shelter Pet Store Re-	homed Found
Behaviors:			
☐ Inside Only ☐ Fea	ars:	History of trying to esca	pe
Has had altercation	on:	Is prone to eating/destroying f	oreign objects:
Has experience w	ith other household pets:		Responds to specific commands:
How does your cat m	ost enjoy spending his/her time:		
What activities might	your cat(s) enjoy with a pet sitte	er? Petting Brushing H	olding Playing with toys
Avoid physical co	ontact Other:		-
Health History:			
Allergies or regula	r medications:		
My cat(s) is/are up-to	o-date on the following vaccination	ons: Rabies Other:	
Please explain any he	ealth conditions:		
Feeding Instructions:			
What else would you	like me to know about your cat(5)?	