

Dr. Kate Lindley  
Dr. Sharon Starry



Kitty Klinik of Thurston County  
4411 Lacey Blvd SE  
Lacey, WA 98503  
United States  
(360) 456-5603

Welcome and thank you for choosing the Kitty Komfort-Inn! The purrfect place for your cat to vacation while you are away! It is our goal to keep your pet happy here so you can enjoy your time away. Charges are calculated on a *per night* basis. Each night begins at the end of our regular office hours. There is no drop-off or pick-ups after regular hours, on Sundays, or on holidays.

Veterinary services are charged according to regular Kitty Klinik prices. All bedding etc. must be machine washable and we are not responsible for lost or damaged items. All water to drink is filtered.

<b>BOARDING</b>		<b>ESTIMATE</b>
	<b>Economical Boarding spaces</b>	\$20.00 / night / pet
	<b>Cat Suites (max 2 pets per suite)</b>	\$30.00 / night (\$15 for additional pet)
	<b>Large Family suites (max 4 pets)</b>	\$40.00 / night (\$15 for additional pet)
	<b>Small Bird, Reptile, or Rodent in Conference Room</b>	\$20.00 / night
	<b>Rabbit, Ferrets, Birds in suite</b>	\$30.00 / night (\$20.00 / night)
	<b>Giving owner's fluids</b>	\$18.00 / treatment
	<b>Treatments (shots, pills)</b>	\$5.00 / each time treated
	<b>Medicine mixed into food</b>	\$4.00 / each time treated
	<b>Items:</b>	
	<b>Syringe Feed</b>	\$7.00 / each time treated
	<b>One or more people to treat upset cat</b>	\$10.00 / each time treated
	<b>Video viewing by pet</b>	\$5.00 / day
	<b>E-mail report (Max of 2 per week)</b>	\$5.00 each time w/o pic \$7.00 each time w/ pic
	<b>E-mail address:</b>	

**E-mails will be sent according to time availability**

<b>GROOMING</b>		<b>ESTIMATE</b>
	<b>Light brushing</b>	\$20.00
	<b>Nail Trim</b>	\$19.50
	<b>Bath- Shorthair</b>	\$35.00
	<b>Bath- Longhair</b>	\$41.00

<b>BOARDING REQUIREMENTS</b>		<b>ESTIMATE</b>
	<b>Exam</b>	\$45.00
	<b>Distemper</b>	\$20.00
	<b>Rabies</b>	\$20.00

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## **Boarding Pet Information Sheet**

Date:

<b>Patient Name:</b>	<b>Owner's Name:</b>
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<b>If your pet has a medical condition and has not been treated at the Kitty Klinik, please list health concerns below:</b>

<b>Current Veterinary Clinic providing care:</b>

<b>May we contact your Veterinary Clinic for current medical records:</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input type="checkbox"/>
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We will try and duplicate your pet's food and litter, within reason, to make the stay as home-like as possible. We stock Hills, Iams and some Purina products. If your pet has some special dietary needs that can't be met by our hospital diet, please bring what you would like us to use. Our standard diet is Hills Adult Maintenance.

<b>My Pet eats:</b>

<b>My Pets litter is:</b>

<b>My Pet's daily routine usually is:</b>

<b>Please list personal items left with pet:</b>

<b>Total Estimated Fees</b>	\$
<b>50% Deposit</b>	\$
<b>Total Paid (at time of drop-off)</b>	\$
<b>Estimate Prepared by</b>	
<b>Date:</b>	



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All Boarding pets have access to a veterinarian so we have the ability to do care for pets with special needs. A full line of grooming services is also available.

I, (the pet's owner) understand that a current rabies vaccine is required by Washington State Law and that an up-to-date distemper vaccine is necessary to board at the Kitty Komfort Inn. We board cats, birds, reptiles, ferrets, and other pets-except dogs. We recommend all exotics be housed in their own cage to reduce stress. Each suite is individually vented to the outdoors. However, the economical boarding is vented as one unit so there is some risk of disease spread through the air. Strict sanitation procedures are followed at all times, hands are washed between handling of each pet, and pets are not allowed in contact with pets besides their own family members.

A pre-boarding physical is required for fragile animals, geriatrics or poorly regulated diabetics. Pets that become ill during boarding will be hospitalized downstairs at the kitty Klinik. In that case, I agree to provide any pertinent medical history or authorize records to be released from my regular veterinarian. I understand there may be unforeseen events that occur during boarding and release the staff, Kitty Klinik, and Kitty Komfort Inn from all liability. I realize that sub-clinical and chronic illnesses may be activated by the stress of being away from home. If my pet has a problem while boarding, every effort will be made to contact me. If I cannot be reached a minimal amount will be done to diagnose and treat my pet's problem at my expense. All veterinary services will be billed at Kitty Klinik fees. Extremely ill pets may be transferred to Olympia Pet Emergency at the owner's expense for night time care.

An estimate for boarding fees has been provided. A 50% deposit is required when my pet is admitted with the balance due when it is picked up. If your stay is cut short we will refund the unused balance. If you extend your stay, please let us know immediately and pay any outstanding balance plus the extra days your pet will be staying. If your pet is not picked up on time and you do not contact the Kitty Komfort Inn, your pet will be classed as abandoned within 72 hours and transferred to Thurston County Animal Services.

The Kitty Komfort Inn will apply flea treatment to any pet, (at cost to the owner) that has fleas in order to maintain a flea-free environment.

All medications not dispensed by The Kitty Klinik must be in a clearly labeled container with directions printed on it in a readable fashion.

**I have read and agree to the above policies.**

**SIGNATURE**

**Date:**

<b>CONTACT PHONE #</b>		<b>EMAIL</b>	
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**OTHER RESPONSIBLE PARTY FOR EMERGENCY CONTACT:**

<b>NAME</b>		<b>CONTACT PHONE #</b>	
<b>SECOND CONTACT</b>		<b>CONTACT PHONE #</b>	

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## Emergency Care While Boarding

If my pet experiences a health crisis while boarding, I authorize the use of sedatives and pain medications as needed, and in an emergency situation for the clinic staff to do what they deem necessary. It is understood that there may be unforeseen health complications while I am away and that further treatment may be necessary if my pet needs to be transferred downstairs for hospitalization.

Estimates for all treatments will be made available to me and I accept and assume full and total financial responsibility for any and all services quoted to me and agree to pay my account in full when my pet is discharged.

Many of the medications we use are not specifically labeled for cats or exotic pets.

### **SIGNATURE**

**Date:**

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I understand that my pet is in a fragile medical state and the stress of boarding can bring on a sudden health crisis. In the event that I can not be reached I allow the veterinarians at the Kitty Klinik to make decisions on my pet's behalf. It is my wish **not** to have cardiopulmonary resuscitation or other extreme life saving measures used on my pet because I understand that the success of such procedure is very low.

If I wish for life saving measures to be attempted I understand that my animal may not fully recover and there will be additional charges for any procedures.

In either case, I release the Kitty Klinik, Kitty Komfort Inn and all its employees from all liability associated with honoring my directive.

### **SIGNATURE**

**Date:**

<input type="checkbox"/> DNR	<input type="checkbox"/>	<input checked="" type="checkbox"/> Please try to save	<input type="checkbox"/>
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**BOARDING PHOTO RELEASE FORM**

I, \_\_\_\_\_, the owner of \_\_\_\_\_ agree to  
the  
following:

I understand that my pet(s) may be photographed at the The Kitty Klinik/The Kitty Komfort Inn. I

understand that these photographs may be used in promoting boarding care services, either in print or on the Internet.

With my signature below I grant permission for my pet(s) to be photographed, or their images recorded for print or electronic use in promoting the The Kitty Klinik/The Kitty Komfort Inn services. I understand that it is my responsibility to update this form in the event that I no longer

wish to authorize the above uses. I agree that this form will remain in effect during the term of my pet(s) boarding. I understand that there will be no payment for me for my pet(s) participation in this release.

<b>Approve</b>	<input type="checkbox"/>	<b>Decline</b>	<input type="checkbox"/>
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Pet Owner Signature

Date: