

# BULLAR TREE QUESTIONNAIRE - CATS

Whilst your cat is in our care, every effort will be made to ensure their safety & comfort. In order for us to provide the best service we can & keep as close to their usual routine as possible, please complete this questionnaire so that we can get to know your cat from your perspective before meeting them ourselves:

Owners Name & Address: \_\_\_\_\_

\_\_\_\_\_

Cats' Name: \_\_\_\_\_ Breed (if known): \_\_\_\_\_

Age or DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Neutered Y/N

Microchip No (if applicable): \_\_\_\_\_

Vet Details: \_\_\_\_\_

\_\_\_\_\_

Any pre-existing health issues? \_\_\_\_\_

\_\_\_\_\_

Date of last flea/worm treatment \_\_\_\_\_

Name of flea/worm treatment used \_\_\_\_\_

What do you feed your cat & how often? \_\_\_\_\_

Are they allowed treats? Y/N

Does your cat enjoy being brushed? Y/N Does your cat like to hide?! Y/N

Does your cat enjoy being fussed & cuddled? Y/N Do they know how to use a cat flap? Y/N

Any areas they don't like being touched? Y/N Details \_\_\_\_\_

Does your cat have a favourite activity? Y/N Details \_\_\_\_\_

Does your cat have any 'strange' habits? Y/N Details \_\_\_\_\_

Is there anything else you feel we need to know about the personality of your cat or any special instructions you need to pass on (please continue over the page if necessary):

\_\_\_\_\_

\_\_\_\_\_