

ID # \_\_\_\_\_

Wags to Whiskers of Texas, Inc.

MICROCHIP # \_\_\_\_\_

*Please attach a color photo of the cat or kitten. No hands or faces in the photo.*



## Cat Profile

Name of Pet \_\_\_\_\_

Date ID# assigned \_\_\_\_\_

Male/Female Breed \_\_\_\_\_

Color \_\_\_\_\_

Hair Length S \_\_\_ M \_\_\_ L \_\_\_

Age \_\_\_\_\_ DOB \_\_\_\_\_

Spay/Neuter Date \_\_\_\_\_

Type of food used: DRY \_\_\_\_\_

WET \_\_\_\_\_

Does the cat do well with children? Unknown No Yes Age: Older Younger All

Does the cat live with other animals? Yes No What type? Cat Dog Other \_\_\_\_\_

What type of litter is used? Clay Scoop Pine Newspaper Brand: \_\_\_\_\_

What type of litter box is used? Open Covered Electric

What type of toys does the cat like? Feathers Balls Furry Mice Other: \_\_\_\_\_

Does the cat use a scratching post? Yes No If yes, what type? \_\_\_\_\_

Is the cat declawed? Yes No Where is the cat kept? Inside Outside Both

ORIGIN OF CAT \_\_\_\_\_

What characteristics best describes the cat? **KITTEN** \_\_\_\_\_ **ADULT** \_\_\_\_\_ ?



Lap Cat

Dog Lover

Active

Cuddly

Playful

Mischievous

Shy

Curious Nosey

Spunky

Nervous

Finicky

Friendly

Aloof

Quiet

Additional Comments regarding the Cat: \_\_\_\_\_

\_\_\_\_\_

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Name \_\_\_\_\_

Date ID# assigned \_\_\_\_\_

Breed \_\_\_\_\_

DOB \_\_\_\_\_

M/F \_\_\_\_\_

Hair Length S \_\_ M \_\_ L \_\_

Weight \_\_\_\_\_

Sterilization Date \_\_\_\_\_

Adoption Date \_\_\_\_\_

**Vaccination History**

Vaccine	Date Given		Label
FVRCP			
Rabies			

← Write the date FVRCP vaccine was given and attach the vaccine label here or, Include the veterinarian records proving the vaccine was given. Include proof of rabies vaccination and spay / neuter if applicable

**Worm Treatments:** \_\_\_\_\_

\_\_\_\_\_

**Flea Treatments:** \_\_\_\_\_

\_\_\_\_\_

**Additional Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_