

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 _____



Lap Cat

Dog Lover

Active

Cuddly

Playful

Mischievous

Shy

Curious Nosey

Spunky

Nervous

Finicky

Friendly

Aloof

Quiet

Additional Comments regarding the Cat: _____

ID # _____ Wags to Whiskers of Texas, Inc.

MICROCHIP # _____

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: _____
