**Feline Behaviour Consultation Form**

Your name…………………………………………………………………………….

Address………………………………………………………………………………..

…………………………………………………………………Postcode……………...

Telephone no. (Mobile)………………………….(Home)………………………………

Email………………………………………………………………………………….

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Name of cat/ kitten………………………………….………………………..

Age (years/months)………………………Colour/ markings……………………………

Breed/Type………………….…………………………….

Male  Female Is your cat neutered? Y/ N

Did their behaviour change after being neutered? ……………………………………….

Veterinary practice responsible for your cat/ kitten………………………………………

Date of last vet check……………………..

Where did you get your cat (eg breeder/ rescue/ private sale)?……………….………….

When? ………….

What were the reasons for getting this particular cat/ kitten?

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Briefly list the main problems/ things you would like to improve:

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Please list anyone else who lives at home or has regular contact with your cat (inc. ages of children under 16):

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Please list any other pets you have:

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What is your cat’s reaction to visitors entering the house/ getting close?

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Please briefly outline your cat’s daily food (when, how much, brands, dry/ wet etc.):

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Do you give your cat special food treats? Please list examples:

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Are they a house cat only, or do they have access to outside? …………………………

If allowed outside, do they have a cat-flap or do they ask to be let out? …………………

Please describe where they are/ aren’t allowed indoors, including favourite spots:

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Do you regularly play with your cat? For how long, and what sort of toys do you use?

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Please describe the issues you are having with your cat. It would be useful to include:

* when the problems began
* what behaviours are displayed
* when the behaviour is displayed (i.e. what are the triggers?)
* what you have done to try to stop them from happening, and whether this had any effect on their behaviour
* any other information you feel will be helpful

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What are your aims for your cat, yourself and for the future?

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Signed………………………………………………………… Date……………………