

Lundberg Siberians ~ Allergy Visitation

Name _____ Phone: _____
Add: _____ Cell: _____
City: _____ Email: _____
State: _____ Zip: _____ How many visitors: _____

Allergy visits allow folks to visit tested very low Fel d1 Siberians and see how they react. Please allow 30-60 minutes to visit with the cats and discuss your allergies. Visitors must bring their allergy medications with them: including eye drops, inhalers, antihistamines.

Visitors must bring Children's chewable Benadryl in case of severe reactions. Visitors agree to take reasonable precautions, including obtaining and following the advise of their physician.

COMPLETE THE FOLLOWING ALLERGY QUESTIONS. YES / NO

Does any family member have allergies or reactions to the following.

Cats: _____ Dogs: _____ Horses: _____ Rabbits: _____ Other: _____

Milk: _____ Eggs: _____ Beef: _____ Pork: _____

If yes, do allergic reactions to the food or animals listed above cause:

Hives _____ Asthma _____ Rashes _____ Itchy Skin _____

Describe the nature & severity of the worst reactions listed for each individual visiting.

1) _____

2) _____

3) _____

Have you spent time with a Siberian or a Siberian Cattery? If yes, where and did anyone react?

TESTING FEE \$100. Submit payment for your visit by Check or PayPal.

Signed _____

Dated: _____

Lundberg Siberians

39800 Mertz Dr. SE

Stayton, OR 97383

503-769-2038

info@lundbergsiberians.com

Lundberg Siberians accepts no responsibility for adverse reactions to their cats arising from Cattery visits. By signing above and requesting a cattery visit, you agree to hold the Cattery and the Guest Homeowner completely harmless for any liability arising from your visit to the premises and from exposure to the cats.