



CLIENT INFORMATION

Name: _____ Referred by: _____

Address: _____

Directions: _____

Total # of Pets in the Home: ____ Dogs ____ Cats ____ Birds ____ Fish ____ Cage Pets ____ Other (please list) _____

Contact Information

Home Phone: _____ Work Phone: _____ E-mail: _____

Cell Phone: _____ Can you accept text messages? Yes No If yes, would you like to receive photos of your pet(s) via text during your absence? Yes No

Contact Preference/In Town: Home Phone Cell Work E-mail Text

Contact Preference/While Away: Home Phone Cell Work E-mail Text

Client Permission: Allow photos of your pet(s) to be posted on pet sitting company's social media sites (Facebook, twitter, etc.)? Yes No

In case of emergency, with your pet(s) or home, and you cannot be reached, who should we contact?

Name & Address: _____ Phone: () _____

Travel Information (if applicable):

In the event that you cannot be reached by your cell phone and/or email, please provide your out-of-town lodging information below.

Hotel/where you will be staying: _____

Phone: () _____ (We MUST have a telephone number or way to reach you.)

Date & hour leaving town: _____ Date & hour returning: _____

Means of travel: Car Plane: Flight/Carrier _____ Other _____

In case of inclement weather or natural disaster prohibiting travel, is there a nearby neighbor whom we may call to check on your pets?

(Name, address and phone number.)

In the unlikely event that you are unable to return and assume care of your pet(s), please list the name of the person(s) we should contact to take over the care of your pet(s) until final pet guardianship is determined by arrangements made in your will or other legal documents.

Please be sure that you have notified the person(s) below that you have listed them as your emergency pet guardianship contact and that we have been given their contact information.

Name: _____ Phone: () _____

Please note: PET-SITTING ASSIGNMENT SPECIFICATIONS section below will be completed by the pet sitter at the initial consultation.

PET-SITTING ASSIGNMENT SPECIFICATIONS

Summary of Scheduled Visits:

Day or Dates	No. Visits Per Day	Pet's Name	A.M. Diet	P.M. Diet	Daily Exercise	Daily Medications	Restrictions

Pet Care Information:

Pet's Name	Description (Color/Breed)	Sex S/N*	Personality (Fears/Phobias)	History of Illness/Biting	Current on Shots	Collar Color	ID Tag? Yes/No	Favorite Toys/Special Treats

S/N* — Spayed or Neutered

Location of Food/Water Dishes: _____

Pet Food/Treats Located: _____

Leash Located: _____

Leash Requirements or Restrictions (if applicable): _____

Cleaning Supplies Located: _____

Outdoor "Accident" Cleanup and Disposal? _____

Indoor "Accident" Cleanup and Disposal? _____

Litter Box Location(s): _____

Disposal of litter box contents? _____

Additional Instructions:

What parking is available for the pet sitter? _____

Are there any rooms that are off limits to pets/people? _____

If necessary, does the pet sitter have permission to use your restroom? Yes No

Other pet duties (any additional requirements or tasks to be completed for the pets during assignment): _____

Home-Care Information:

KEY(S) RECEIVED AND TESTED

Locksmith Clause: In the event that Pet Sitter is required to employ a locksmith to gain entry into Client's premises due to a malfunction of the lock or a failure of the Client to leave a key, it shall be the responsibility of the Client to reimburse for all costs incurred. The Client expressly gives Pet Sitter the authority to employ a locksmith on Client's behalf in the event of the aforementioned occurrences.

KEY RETURN: In Person, \$_____ Left On Final Visit Returned By Mail Other _____ Garage Door Opener*

*We must have a house key if garage door opener is used for home access.

Is it possible others may be at the home when the Pet Sitter arrives to the home (cleaning service, etc.)? If so, please list below.

Access Code: _____ Alarm Instructions: _____

Are security cameras in use at the home? Yes No If yes, locations: _____

Veterinarian Information: _____

In the event the pet sitter arrives to the home to discover the electricity is off, pipe is broken, etc., what should the pet sitter do?

- Contact owner (Work Cell) Notify emergency contact
- Contact electrician, plumber, etc. (If checked, provide contact information below.)

Others who have access to home (incl. phone numbers):

Other phone numbers:

Landlord: _____ Maid/Cleaning Service: _____

Plumber: _____ Electrician: _____

Will pet-care responsibility be shared with anyone else during your absence? Yes No

If yes, please give name, address, phone number of other person and details of job sharing arrangement. _____

PLEASE NOTE: If anyone else has access to your home while the pet-sitting job is being performed, we, the pet-sitting company, can assume no liability for any damages or losses to your home or pet.

The utmost of care will be given in watching both your pet(s) and your home. However, due to the extreme unpredictability of animals, we cannot accept responsibility for any mishaps of an extraordinary or unusual nature (i.e., bitings, furniture damage, accidental death, etc.) or any complications in administering medications to the animal. Nor can we be liable for injury, disappearance, death or fines of pet(s) with access to the outdoors.