

Kitten's Dog Walking & Pet Sitting Services

Pet Service Agreement

OWNER INFORMATION

Name (Please list each owner/parent)_____

Address_____ City_____ Zip_____

Cell Phone_____ Work_____ Home_____

E-Mail Address_____ E-Mail Address_____

Emergency Contact_____ Relationship_____

Cell Phone_____ Work_____ Home_____

How did you find us?_____

PET INFORMATION

Pet Name_____

Age_____ Gender_____ Species_____ Breed_____ Color_____

Spayed/Neutered_____ Diet_____ Micro Chipped_____

Feeding instructions_____

Any medications? _____ Health Concerns _____

Medication #1 _____

AM dose _____ Afternoon dose _____ PM dose _____

Medication #2 _____

AM dose _____ Afternoon dose _____ PM dose _____

History of aggressive behavior (toy aggression, cage aggression, fence aggression, food aggression) _____

If yes, please explain _____

What training has your pet had: None _____ Basic _____ Advanced _____

Please list key training words and the behavior associated with that word (for example--do you say "down" or "off" if you pet jumps up on a guest? How do you communicate during walks?)

Word _____ Behavior Associated _____

ADDITIONAL PETS

Pet Name _____

Age _____ Gender _____ Species _____ Breed _____ Color _____

Spayed/Neutered _____ Diet _____ Micro Chipped _____

Feeding instructions _____

Any medications? _____ Health Concerns _____

Medication #1 _____

AM dose _____ Afternoon dose _____ PM dose _____

Medication #2 _____

AM dose _____ Afternoon dose _____ PM dose _____

History of aggressive behavior (toy aggression, cage aggression, fence aggression, food aggression) _____

If yes, please explain _____

What training has your pet had: None _____ Basic _____ Advanced _____

Please list key training words and the behavior associated with that word (for example--do you say "down" or "off" if you pet jumps up on a guest? How do you communicate during walks?)

Word _____ Behavior Associated _____

Pet Name _____

Age _____ Gender _____ Species _____ Breed _____ Color _____

Spayed/Neutered _____ Diet _____ Micro Chipped _____

Feeding instructions _____

Any medications? _____ Health Concerns _____

Medication #1 _____

AM dose _____ Afternoon dose _____ PM dose _____

Medication #2 _____

AM dose _____ Afternoon dose _____ PM dose _____

History of biting _____ Bit a person _____ Bit another animal _____

History of aggressive behavior (toy aggression, cage aggression, fence aggression, food aggression) _____

If yes, please explain _____

What training has your pet had: None _____ Basic _____ Advanced _____

Please list key training words and the behavior associated with that word (for example--do you say "down" or "off" if you pet jumps up on a guest? How do you communicate during walks?)

Word _____ Behavior Associated _____

Additional Misc Notes

EMERGENCY CARE

I, _____, authorize Miranda Downey of Kitten's Dog Walking & Pet Services to act as my agent in the event of my pet needing medical attention. I further agree

that I will be responsible for any and all costs associated with veterinary care deemed necessary by a veterinarian.

Signature _____ Date _____

DECLINE OF EMERGENCY NOTIFICATION

I, _____, ***DO NOT*** wish to be notified of an emergency while I am away on vacation or an extended stay.

Signature _____ Date _____

PET CARE INFORMATION

Location of food _____

Will there be enough food on location for duration of stay or will owners be leaving a cash allowance for additional food, treats, waste bags, etc. _____

Location of leashes/collars _____

Favorite toys _____

What do you use to clean up feces _____

Where are cleaning supplies located _____

Is your yard securely fenced _____ If no, please explain _____

Instructions for hot weather _____

Instructions for rain/snow _____

IMPORTANT PHONE NUMBERS

Vacation contact information _____

Neighbor contact information _____

Relative contact information _____

Name of veterinary clinic _____

Address _____ Phone _____

Name of emergency veterinary clinic _____

Address _____ Phone _____

Will any other people be providing pet services during your absence? (pooper scooper, trainer, acupuncturist, etc.) _____ If yes, please explain _____

Will any other people be visiting the home during your absence? (house cleaner, landscaper, exterminator, etc.) _____ If yes, please explain _____

For extended stays: Please list numbers for utility services and make sure they are aware that you will be away and a house sitter will be in your home

Heating _____

Power _____

Water _____

Trash _____

—

Telephone/Cable/Internet _____

ALARMS

Gate Code/Instructions _____ Alarm Code/Instructions _____

Alarm Company _____ Phone _____ Secret Code _____

Does anyone have alarm codes to your house _____ If yes, please explain _____

For extended stays: Please let your security company know you will have a house sitter in the home.

HOME CARE

Do you want lights rotated _____ Blinds _____ TV/Stereo _____

Windows open _____ Newspaper _____ Misc _____

Mail _____ Location of mail box _____ Mail box # _____

Location of trash can _____ Trash day/time _____

House plants watered _____ How often _____

Where is the snow shovel stored _____

YARD CARE

Pooper scooper/poop bag location _____ Where to dispose _____

Sprinkler system _____ On timer _____ When _____

KEYS

House key tested _____ Gate key tested _____ Mailbox key tested _____

Does anyone have keys to your house _____ If yes, please explain _____

Would you like keys kept on file for immediate future service _____ If not, when can keys be handed off to you after your return (please note that keys cannot be left unsecured such as under a mat, etc. They also cannot be locked inside the house in case you do not return as expected.) _____

ADDITIONAL INSTRUCTIONS

TERMS AND CONDITIONS

For the purposes of this contract Kitten's Dog Walking & Pet Services and/or representatives will be referred to as PET SITTER and the Pet Owner will be referred to as OWNER. The parties herein agree to the following terms and conditions.

1. A minimum deposit of 50% of the total cost of the Pet Sit is due at the time of booking and the remaining 50% is to be paid at the time of the first visit and left in a conspicuous place for PET SITTER. Holidays require a full payment of services at consultation. A finance charge of 20% per month will be added to unpaid balances after 14 days. A handling fee of \$50.00 or ½ the total amount of the check (whichever is greater) will be added to all returned checks.
2. Payment for all subsequent Pet Sits will be paid in full and left in a conspicuous place for the PET SITTER at the first visit.
3. Refund and cancellation policy--If OWNER plans to shorten their trip, they must give PET Sitter a minimum of 48 hours notice in order to receive a refund for remaining days. **Deposits are non-refundable.**
4. If OWNER plans to lengthen their trip, they must telephone and speak to PET SITTER within a minimum of 12 hours in advance of last scheduled Pet Sit in order to be put back on PET SITTERS schedule. Owner agrees to pay all additional fees incurred immediately upon their return.
5. OWNER agrees to telephone PET SITTER promptly upon safely returning home and leave a message in order not to incur another Pet Sitting charge.
6. OWNER agrees to inform their veterinarian that PET SITTER will be caring for their pet(s) in their absence. If possible, OWNER will leave credit card information with their veterinarian or make other arrangements to have veterinarian reimbursed for any service necessary during their absence.

7. OWNER agrees to inform their utility companies that PET SITTER will be caring for their home in their absence. If possible, OWNER will leave credit card information, set up auto payments or make other arrangements to have utilities maintained during homeowners absence.
8. If a medical emergency arises for pet, PET SITTER will make every effort to contact the OWNER immediately if emergency notification was not declined. OWNER authorize PET SITTER to seek medical services. OWNER agrees to reimburse PET SITTER for all services rendered during emergency care.
9. If a home emergency arises, PET SITTER will make every effort to contact the OWNER immediately. OWNER authorize PET SITTER to seek appropriate services. OWNER agrees to reimburse PET SITTER for all services rendered during emergency.
10. In the unlikely event of illness or personal emergency to PET SITTER, OWNER will authorize PET SITTER to arrange for another qualified person to fulfill responsibilities as set forth in this contract, OWNER will be notified as soon as possible in such a situation.
11. It is the OWNER'S responsibility to make sure all of their pet(s) are current on vaccinations or have had titer test to evaluate pet's individual immune status. Should PET SITTER be bitten or otherwise injured by OWNER'S pet(s), OWNER agrees to pay all medical costs and lost wages incurred by PET SITTER due to such injury.
12. OWNER is responsible for any injury caused to PET SITTER or the general public by OWNER'S pet(s) or condition of OWNER'S premises.
13. In the event of inclement weather or natural disaster, PET SITTER will use their best judgment in caring for the OWNER'S pet(s) and home but cannot be held responsible for any damages to home or injury to pet arising from such situations.
14. PET SITTER recommends having protocol in place for unexpected emergencies. If a problem arises such a as pipe rupture, flooding, earthquake, fire, break-in, animal destroying fence, etc., PET SITTER will make every effort to contact OWNER and follow their instructions. If possible, OWNER will leave credit card information with their maintenance company or make other arrangements to have maintenance company reimbursed for any service necessary during their absence. If OWNER cannot be reached or immediate action is necessary for the health, safety and welfare of the pet(s), OWNER authorizes PET SITTER to make any repairs deemed necessary by the PET SITTER. The OWNER agree to reimburse PET SITTER to make any repairs deemed necessary by PET SITTER. The OWNER agrees to reimburse PET SITTER for all expenses incurred for repair of property and will hold PET SITTER blameless for work done by other.

15. OWNER is to notify PET SITTER if anyone else has keys or access to OWNER'S property other than PET SITTER during the time the PET SITTER is caring for the OWNER'S home and pet(s). PET SITTER cannot be held liable for damage done to home and pet(s) by others with such access. In addition, PET SITTER shall not be held liable for damage done by pet(s) to either the interior or exterior of home or furniture.
16. PET SITTER is not liable for pets that are left outside or may escape.
17. OWNER shall, at OWNER'S sole expense, defend PET SITTER against any claim or demand, whether or not well founded arising from any act(s) of OWNER'S pet(s) or relation to OWNER'S property. OWNER shall indemnify and hold PET SITTER free and harmless from all cost expenses and liabilities in connection with such claims or demands, These costs, expenses and liabilities include amounts paid in settlement before or after suit is commenced, attorney's fees and costs incurred by PET SITTER in defending against such claims or demands.
18. PET SITTER will provide the services stated herein in a reliable, caring and trustworthy manner. In consideration of these services and as an express condition thereof, OWNER expressly waives and relinquishes any and all claims against PET SITTER except those arising from gross negligence and willful misconduct on the part of the PET SITTER.
19. Should any section, provision or portion of the contract be held to be invalid, illegal, void or unenforceable, then section, provision or portion shall be deleted. The remainder of the contract will continue and remain in full force and effect.
20. Any controversy or claim arising out of or in relation to this contract shall be brought to Small Claims Court before any other legal action is taken. If the matter cannot be resolved in Small Claims Court then the parties agree to binding Arbitration in accordance with state where contract is signed. The arbitrator shall be based on the rules of the American Arbitration Association.
21. This contract shall be interpreted and governed by the laws of the State in which it is signed. Each party will perform its obligation in accordance with all the applicable laws, rules and regulations of said State.
22. No term or provision of this contract shall be waived and no breach excused verbally. To be effective, each waiver or excuse shall be in writing and signed by the party who waived or excused.
23. Each waiver or excuse shall be independent of all other. Therefore, if a term or provision is waived or breach is excused, that waiver or excuse shall not waiver any other term or provision or excuse any other breach.
24. In no event will PET SITTER be liable to OWNER for any damages, including, but not limited to, any lost profits, lost savings or their incidental or consequential damages

arising out of the OWNER'S use of PET SITTER services, nor will PET SITTER be liable for any claim, by any third party, unless gross negligence or willful misconduct is proven on the part of the PET SITTER.

25. PET SITTER reserves the right to terminate this contract at any time before or during its term if PET SITTER, in their sole discretion, determines that the OWNER'S pet(s) pose a danger to the health and/or safety of PET SITTER. If this occurs PET SITTER will notify the OWNER immediately of the problem and determine whether OWNER will return or if pet(s) will need to be placed in a kennel with all charges to be charged to the owner.
26. OWNER authorizes this signed contract to be valid approval for future services of any purposes provided by this contract permitting PET SITTER to accept telephone reservations for service and to enter the premises without additional signed contracts or written authorization.
27. _____ By placing my initials here and signing this contract, I agree to read the TERMS AND CONDITIONS in their entirety. If I have any questions about the above, I will email or telephone PETSITTER before the Pet Sit is to begin.

(OWNER Print Name) (Date)

(PET SITTER Print Name) (Date)

(OWNER Signature) (Date)

(PET SITTER Signature) (Date)