

My Favorite Pet Sitter Pet Sitting Contract

Folsom, CA
916-990-3911
info@myfavpetsitter.com

Client Information

Client's Name: _____ Date: _____
 Address: _____ Carport # (apts. only): _____
 Home #: _____ Cell #: _____ Other #: _____
 Email Address: _____ Security Code: _____
 Where did you hear about us? _____ Password: _____

Emergency Contact Information

Emergency Contact: Name: _____
 City: _____ Phones: _____
Veterinarian: Name: _____
 Address: _____ Phone: _____

Pet Information

Location of:
 Pet Food: _____
 Leashes/Carriers: _____
 Litter Boxes and Litter: _____
 Carpet Cleaner and Towels: _____
 Outdoor Trash: _____
 Okay to Brush Pets? _____ Okay to Give Treats? _____ Pet Wears Tags? _____
 Vaccinations Current? _____ Microchipped? _____ Spayed/Neutered? _____
 Cats In, Out, or In/Out? _____ Dog Door? _____ Bite/Aggression History: _____

Pet's Name	Type of Pet	Gender/Birthdate/Description	Type/Amount/Freq of Food	Exercise	Medications or Special Conditions

Client Must Initial the Following:

- _____ Please provide our pet(s) with any necessary emergency medical treatment; we will be responsible for all related charges.
- _____ (Optional) Please provide first aid and/or CPR to our pet(s) as a life-saving measure prior to transportation to veterinarian.

In the unlikely event that your pet passes on in your absence, what should occur? (Initial only one option)

- _____ Take pet to the vet to hold for me to pick up.
- _____ Take pet to the vet for disposal in their normal procedure.
- _____ Take pet to the vet for private cremation.
- _____ Other: _____

Key(s) and half of the estimated cost are due at the time of consultation. The balance is due prior to the first visit. If additional supplies are needed, My Favorite Pet Sitter (hereinafter referred to as "MFPS") will purchase additional supplies with the understanding that reimbursement will be made by the client upon return. Emergency trips to and from the veterinarian or time spent to look for runaway pet(s) will be charged at a rate of \$35/hour. All returned checks will incur a \$25 return check fee. **A weekly late fee of \$5 will be charged on accounts unpaid in excess of 14 days starting from the first visit.**

Client agrees not to hold MFPS liable for any loss, injury, or illness to any pet that is normally allowed outside. Client also agrees to release MFPS from any claim for injury, loss, or death of pet owner's pet(s); client agrees not to hold MFPS liable for any loss and/or damage to client's property. If MFPS is required to take legal action to enforce the terms of this contract, including but not limited to legal action to collect a past due account, client will be responsible for any legal fees that are incurred.

MFPS may continue its assigned pet sitting service until notified by the client of the client's return home. If MFPS continues to provide pet sitting services because they were not notified of the client's return home, all fees will continue to apply until notified by client. However, client agrees that MFPS is not obligated to provide pet sitting services for dates that are not covered by the pet sitting instructions, regardless of whether or not the client fails to notify MFPS that they have returned home.

A 14-day cancellation is required for cancellations of overnight visits. Overnight cancellations made less than 7 days in advance will be charged the full estimated cost for pet sitting services. Overnight cancellations made less than 14 days in advance will be charged one half of the estimated cost.

For all other regular visits, a 48-hour notice is required. Regular cancellations made with less than 24 hours in advance will be charged the full estimated cost for pet sitting services. Regular cancellations made less than 48 hours in advance will be charged one half of the estimated cost. All cancellations will incur a \$10 cancellation fee if a key return is necessary. This cancellation policy may change without notice.

All terms of contract apply to all future pet sits.

Client's Signature: _____ **Date:** _____

MFPS Pet Sitter Signature: _____ **Date:** _____