

# PET SITTING SERVICE CONTRACT

## CLIENT INFORMATION

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
\_\_\_\_\_ Bus. Phone: \_\_\_\_\_  
Directions: \_\_\_\_\_ E-mail: \_\_\_\_\_  
\_\_\_\_\_ Referred by: \_\_\_\_\_  
Date & hour leaving town: \_\_\_\_\_ *Where can you be reached?*  
Date & hour returning: \_\_\_\_\_  
Means of travel: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
(We MUST have a telephone number or way to reach you.)  
 Car  Plane: Flight/Carrier \_\_\_\_\_ Do you check home, cell, work or e-mail  
 Other \_\_\_\_\_ messages while you are away? \_\_\_\_\_  
  
*In case of emergency, contact:* \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
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.)  
  
Name, address and phone number of family member, friend or agency/organization who would take custody of your pet in the event of a catastrophe or untoward circumstances preventing your return: \_\_\_\_\_

DATE /AMT. PAID \_\_\_\_\_

Interview Appt.: \_\_\_\_\_

## KEY & ALARM INFORMATION

I, \_\_\_\_\_ (Customer), authorize Frolicking Fido ("Pet Sitter"), including its agents, employees and representatives to utilize the key to my home and to engage in Pet Sitter duties. I understand that Pet Sitter may not make copies of the key or use it for any purposes other than specified in this agreement. I understand that the key will be stored in a confidential locked location only accessible to Pet Sitter.

I understand that once the assignment is complete, the key will be returned to me or kept for the future or last minute emergency visits. Returned keys will result in a \$10 pick up fee for future visits or emergencies.

**Locksmith:** 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.

**Security System:** All information on this form is kept confidential and is not disclosed to third parties.

Alarm code to disarm when entering: \_\_\_\_\_

Alarm re activation before leaving: \_\_\_\_\_

Alarm company and phone number: \_\_\_\_\_

Pet Sitter password: \_\_\_\_\_

**KEY(s) RECEIVED AND TESTED**

### KEY RETURN:

- In Person, \$ \_\_\_\_\_
- Left On Final Visit
- Returned By Mail
- Other \_\_\_\_\_
- Garage Door Opener

# HOME CARE INFORMATION

Others who have access to home (Name & Phone Number)

\_\_\_\_\_  
\_\_\_\_\_

Other phone numbers:

Landlord: \_\_\_\_\_ Maid/Cleaning Service: \_\_\_\_\_

Plumber: \_\_\_\_\_ Electrician: \_\_\_\_\_

Location of fuse box (and fuses)/circuit breaker: \_\_\_\_\_

Primary light switches located: \_\_\_\_\_

Location of thermostat and thermostat/temperature setting for inside home: \_\_\_\_\_

Day or Dates	Bring In Mail	News-papers	Alternate Lights	Curtains	Water Indoor Plants	Water Outdoor Plants	Bird Feeder	TV/ Radio	Litter Box	Answer Phone	Recycling/ Garbage Disposal	Pick-up Time

Additional Instructions/Comments:

\_\_\_\_\_

\_\_\_\_\_

## PET CARE INFORMATION

Pet's Name	Description (Color/Breed)	Pet Birthday	Sex S/N*	Personality (Fears/Phobias)	History of Illness/Biting	Current on Shots	Collar Color	Favorite Toys/Special Treats

S/N\* - Spayed or Neutered

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

Vet Preference: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Is your vet aware that you will be using our pet sitting service?  No, will notify  Yes

Does your pet have health insurance? \_\_\_\_\_

Is your pet up to date on immunizations? \_\_\_\_\_

Is your pet on any medication?  No  Yes (See Permission to Administer Medications Form)

Does your pet have any current diseases, illnesses or disabilities? \_\_\_\_\_

Does your pet have any contagious illness? \_\_\_\_\_

Does your pet have any physical conditions or problems I need to be alert to? \_\_\_\_\_

In the event of your pet's death during your absence, what arrangements should be made?

Are pets secured in home or yard? \_\_\_\_\_

At what external temperature (low/high) should outdoor pets be brought indoors? \_\_\_\_\_

Does your pet allow you to brush and groom it?  Yes  No Grooming preferences: \_\_\_\_\_

Has your pet had obedience training?  Yes  No If yes, commands recognized:

Is the cat declawed? \_\_\_\_\_ If so,  Front & Rear  Front Only

Is the pet microchipped? If so, list chip company, phone # and I.D. # \_\_\_\_\_

How do pets react to your absence from home? \_\_\_\_\_

How does your pet react to other pets; e.g. any in-house grumbling or fighting? \_\_\_\_\_

How does your pet react toward children and adult strangers? \_\_\_\_\_

Has your pet ever bitten anyone, animal or human? \_\_\_\_\_

Are you aware of any reason we should approach any of your pets with caution? \_\_\_\_\_

While walking your pet in your neighborhood, is there anything I should be aware of (e.g. unconfined dangerous dogs, neighborhood issues, etc.)?

\_\_\_\_\_

Pet Food/Treats Located: \_\_\_\_\_

Leash Located: \_\_\_\_\_

Cleaning Supplies Located: \_\_\_\_\_

Outdoor "Accident" Cleanup and Disposal?

Indoor "Accident" Cleanup and Disposal?

Disposal of litter box contents? \_\_\_\_\_

### Sharing Pet Care

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.

### Transportation

I authorize Pet Sitter to transport my pet in case of emergency, groomer visit, or scheduled pet taxi service \_\_\_\_\_ (Initial)

I understand that there will be a transportation charge per mile for service more than five miles from Pet Sitter's location. \_\_\_\_\_ (Initial)

### Pet Boarding in Pet Sitter's Home

I affirm that my pet is clean, recently bathed and on flea and tick control product at this time. \_\_\_\_\_ (Initial)

I will provide food for my pet(s) in bagged small portions upon arrival at pet sitter's home. \_\_\_\_\_ (Initial)

In the case that the Pet Sitter should have an emergency and/or otherwise be unable to provide service at one or more contracted times, I authorize that another Pet Sitter may be substituted for the service required, with advance notice given when possible. \_\_\_\_\_ (Initial)

I agree to pick up my pet(s) by the agreed time and to pay the Pet Sitter at pick-up. I understand that if I fail to pick up my pet(s) by the agreed time and do not contact the Pet Sitter to obtain an extension, there will be a fee. If within seven (7) days of the pick up date, the Pet Sitter is unable to contact me by any of the methods of personal contact I have provided, I understand that the Pet Sitter reserves the right to consider my pets abandoned and may surrender them to the local Humane Society or Animal Control Office at their own discretion. \_\_\_\_\_ (Initial)

### Off Leash Permission for Dog Park, Dog Beach, and other Locations

I give permission to the Pet Sitter to take \_\_\_\_\_ to a dog park for socialization with other animals. I understand that in such a situation it is possible that my pet could be exposed to communicable illness, and agree that Pet Sitter will not be held liable for any such illness my pet may have contracted in public. \_\_\_\_\_ (Initial)

I affirm that my pet shows no aggression towards other animals and has never bitten another animal or person to the best of my knowledge. I understand that although the Pet Sitter will make every effort to ensure the safety of my pet and others, the Pet Sitter cannot be held responsible for any bites or injuries, as I acknowledge that it is impossible to have complete control over any off leash dog situation. \_\_\_\_\_ (Initial)

### Hotel Pet Sitting

I understand that Pet Sitter is not affiliated with your hotel of choice and that Pet Sitter will not undertake Pet Sitting at a hotel if it is not in compliance with hotel rules. \_\_\_\_\_ (Initial)

I agree to alert Pet Sitter to any special requirements for my pet in the hotel, such as wearing a muzzle. \_\_\_\_\_ (Initial)

I agree to make the minimum payment available to the Pet Sitter upon Pet Sitter's arrival at the hotel, and agree to have the remainder available upon the completion of the service. \_\_\_\_\_ (Initial)

I understand that all provisions of this agreement, including the provisions regarding emergencies and pet transportation, apply to Hotel Pet Sitting. \_\_\_\_\_ (Initial)

### Local Pet Care Information

How did you hear about my pet sitting services? \_\_\_\_\_

I would like to receive emails regarding local pet events, lost and found pets, pet adoptions and pet-related coupons.  Yes  No

### Pet Identification & Photos

I give Pet Sitter permission to use my pets' names, photographs, likenesses, etc. for promotional purposes such as Pet Sitter's website, flyers, blogs, film, etc.  Yes  No

## TERMS & CONDITIONS

The parties herein agree as follows:

1. This contract will take effect upon signature by both Client and Pet Sitter and will remain in effect until terminated by either party as provided below in Item 9. The first scheduled service period is from \_\_\_\_\_ through \_\_\_\_\_.  
Client may make telephone reservations for additional service at any time during the term of this contract, subject to Pet Sitter availability. All scheduled visits will be governed by all the terms of this contract. We appreciate as much advance notice as possible, but will make every effort to accommodate all requests. In the event of early return home, Client must notify Pet Sitter promptly to avoid being charged for unnecessary visit(s).
2. Client agrees to pay Pet Sitter at the rates set out on the Pet Sitter Rate Sheet. Client understands that Pet Sitter reserves the right to adjust prices periodically.
3. Client acknowledges that payment is due immediately upon completion of a scheduled service period without further invoice or notice. A finance charge of \$ 10 will be added to unpaid balances after 10 days. A handling fee of \$ 25 will be charged on all returned checks. An advance deposit may be required whenever warranted in the sole judgment of Pet Sitter. In the event it is necessary to initiate collection proceedings on the account, Client will be responsible for all attorney's fees and costs of collection.
4. Pet Sitter is authorized to perform care and services as outlined on this contract. Both Pet Sitter and Client recognize that the welfare of the animal is the highest priority. If, in Pet Sitter's judgment, additional services become necessary during the service period to properly care for the animal, Pet Sitter will first make reasonable attempts to contact Client. If Client cannot be contacted, Pet Sitter is authorized to undertake such additional steps as may in the reasonable judgment of the Pet Sitter be necessary or appropriate for the health and welfare of the animal, including but not limited to (a) additional visits by Pet Sitter to provide care for the animal; (b) consultation with Client's Veterinarian listed above, or with an emergency veterinary care provider should Client's Veterinarian be unavailable; (c) authorizing care and treatment as recommended by Client's Veterinarian or an emergency veterinary care provider (excluding euthanasia) up to a maximum cost of \$ \_\_\_\_\_; and (d) other steps that, in Pet Sitter's reasonable judgment, may be necessary or appropriate for the health and welfare of the animal. Client agrees to be responsible for all fees and expenses incurred for care and treatment of the animal pursuant to this paragraph, and releases and holds Pet Sitter harmless from all liabilities related to transportation, treatment and expense. Client agrees to reimburse Pet Sitter/Company for any expense incurred, plus any additional fees for attending to an animal's needs or any expenses incurred for any other home/food/supplies needed.
5. Pet Sitter agrees to provide the services stated in this contract in a reliable, caring and trustworthy manner. The utmost of care will be given in watching both your pet(s) and your home. However, due to the extreme unpredictability of animals, Pet Sitter 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 Pet Sitter be liable for injury, disappearance, death or fines of pet(s) with access to the outdoors. In consideration of Pet Sitter's services and as an express condition thereof, CLIENT EXPRESSLY WAIVES AND RELINQUISHES ANY AND ALL CLAIMS AGAINST PET SITTER/COMPANY ARISING OUT OF OR RELATING TO THE PROVISION OF SERVICES HEREUNDER, EXCEPT THOSE ARISING FROM GROSS NEGLIGENCE OR WILLFUL MISCONDUCT ON THE PART OF PET SITTER/COMPANY. SHOULD PET SITTER OR ANY AUTHORIZED PERSON ACCOMPANYING PET SITTER SUSTAIN ANY INJURY, DISEASE OR OTHER HARM IN THE COURSE OF PROVIDING SERVICES HEREUNDER, CLIENT WILL INDEMNIFY PET SITTER/COMPANY AND HOLD IT HARMLESS WITH RESPECT TO ALL LOSS, EXPENSE AND DAMAGE CAUSED THEREBY, EXCEPT THOSE ARISING FROM GROSS NEGLIGENCE OR WILLFUL MISCONDUCT ON THE PART OF PET SITTER/COMPANY.
6. In the event of inclement weather or natural disaster, Pet Sitter is entrusted to use best judgment in caring for pet(s) and home. Pet Sitter/Company will be held harmless for consequences related to such decisions.
7. In the event of personal emergency or illness of Pet Sitter, Client authorizes Pet Sitter to arrange for another qualified person to fulfill responsibilities as set forth on this contract. In such case, Pet Sitter will remain fully responsible for the proper discharge of all services under this Agreement. Every attempt will be made to notify client regarding such situation.
8. All pets are to be currently vaccinated.
9. Pet Sitter and Client each may terminate this contract at any time by written notice to the other. Pet Sitter will be entitled to payment for all services rendered until notice of termination is received, and for any transition services reasonably required to provide for the health and welfare of Client's pets. Pet Sitter will not terminate during a period of scheduled service unless Pet Sitter determines, in his/her sole discretion, that a danger exists to the health or safety of Pet Sitter. If such concerns preclude Pet Sitter from providing further care of the pet, then Client authorizes pet to be placed in a kennel, with all charges therefrom to be charged to Client. Every attempt will be made to notify Client regarding such situation.

10. No waiver or modification of this agreement or of any covenant, condition, or limitation herein contained shall be valid unless in writing and duly executed by the party to be charged therewith. Furthermore, no evidence of any waiver or modification shall be offered or received in evidence in any proceeding, arbitration, or litigation between the parties arising out of or affecting this agreement, or the rights or obligations of any party hereunder, unless such waiver or modification is in writing, duly executed as aforesaid. The provisions of this paragraph may not be waived except as herein set forth.
11. This agreement and performance hereunder and all suits and special proceedings hereunder shall be construed in accordance with the laws of the Commonwealth of Massachusetts.
12. Client acknowledges that by signing below, he/she is providing written approval for the provision of services by Pet Sitter during any service period scheduled by Client and accepted by Pet Sitter. Upon such scheduling and acceptance, Pet Sitter/Company will be authorized to enter Client premises and perform services without additional signed contracts or written authorization.

I have reviewed this Service Contract in its entirety. The information provided by me is complete and accurate and I agree to all its terms and conditions as set out above.

"Pet Sitter"(Signature) \_\_\_\_\_ "Customer"(Signature) \_\_\_\_\_

EROLICKING FIDO

# PERMISSION TO ADMINISTER MEDICATIONS

*(Addendum to Pet Sitting Service Contract)*

My signature below authorizes pet sitter,

\_\_\_\_\_ ,

to administer medication and/or prescribed treatments to my pet(s)

\_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_,

for the period of \_\_\_\_\_ through \_\_\_\_\_.

Directions for administration of medication/treatments have been provided and I have notified my veterinarian, acknowledged below, that my pet sitter will be administering this medication and/or treatments in my absence with my complete authorization.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Veterinarian Signature

\_\_\_\_\_  
Date

Rx Notes and Instructions:

\_\_\_\_\_  
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