



New Client Packet

Thank you for choosing Paws Plus Pet Sitting Service!

Instructions:

Please print one copy of the New Client Packet, and complete using a pen. This packet can be printed one-sided or two, in black & white or color.

The New Client Packet includes:

- Service Agreement
- Home Guide & Contact Information sheet
- Pet Information Disclosure Form (Please complete one of these forms for each pet; form is 2 pages)

Have These Items Ready for the Initial Consultation:

1. Your signed and completed documents
2. A key
3. Trip information, including Hotel and if you plan to have visitors while away.



Paws Plus Pet Sitting Service– Service Agreement

For the purposes of this document, the terms Client, Owner, Pet Owner, and Customer are synonymous with the person contracting services for one or more domestic animals.

- Payment by check or cash is due in full at the time pet sitting services are rendered (first day of service). Payment for daily dog walking service is due by the 5th day of the month of service.
- There will be a \$35.00 service charge for each returned check.
- Reservations are made to plan sitter availability to clients. Therefore, clients returning home early will be required to pay for the reserved amount of time scheduled.
- Should daily dog walking services need to be cancelled, a credit will be applied to the next month of service for those cancelled days. Credit cannot be carried over for more than one month.
- Paws Plus Pet Sitting Service is not responsible for wilted, dead or otherwise unhealthy plants. Paws Plus Pet Sitting Service will work hard to follow your written directions as precisely as possible, but cannot be responsible if the results are not favorable.
- Paw Plus Pet Sitting Service is not responsible for damage to the home beyond the control of the Pet Sitter. This includes, but is not limited to leaks, electrical problems and acts of nature. In these situations, Paw Plus Pet Sitting Service will attempt to contact the customer and then the emergency contact before making a subjective decision on dealing with the problem. All repairs and related fees (including Special Service emergency service time and coordination fees) will be paid by the client, or fully reimbursed to Paws Plus Pet Sitting Service.
- Paws Plus Pet Sitting Service is not responsible for any damage to property of the client or others unless such damage is caused by the negligent act of the Pet Sitter. Paws Plus Pet Sitting Service agrees to remain fully insured through PSA or a comparable entity, including optional Special Property Endorsement (protects against theft, breakage, etc as caused by an employee). Paws Plus Pet Sitting Service accepts no responsibility for security of the premises or loss if other individuals have access to a client's home, or if the home is not properly secured.
- At the time that service is booked, Owner will notify the Pet Sitter of everyone who has been granted access to the home during the service period
- Paws Plus Pet Sitting Service is not liable for any loss or damage in the event a burglary or other crime that should occur while under this contract. Pet Owner agrees to secure home prior to leaving the premises. Paws Plus Pet Sitting Service will re-secure the home to the best of its ability at the end of each visit. While keys are in the possession of the Pet Sitter, they will be either on the Sitter's physical person, or be properly stored at an undisclosed location. Paws Plus Pet Sitting Service subscribes to insurance coverage through PSA for lost key lock replacements. Should Pet Owner advise Paws Plus Pet Sitting Service to leave the home unsecure or unlocked while providing pet sitting services, Pet Owner agrees it will not hold Paws Plus Pet Sitting Service responsible for and is not liable for any loss or damage.
- Pet Owner must have legal rights to place the animals in the care of Pet Sitters, Kennels and Veterinary Clinics. The Pet Sitter cannot service a home with "Visiting" pets or animals that do not belong to the resident of the service site without separate set(s) of service agreement and forms, accepted and signed by each rightful owner(s).
- The terms of this document apply to all the pets owned by the Client, including any and all new pets that the Customer obtains on or after the date this document was signed, at any and all locations the Owner designates for service.
- Pet Owner is responsible for pet-proofing house and yard, and the security fences/gates/latches. Paws Plus Pet Sitting Service will not be responsible for the safety of any pets and will also not be liable for the death, injury, disappearance, or legal consequences of any pet with unsupervised access to the

outdoors. Paws Plus Pet Sitting Service will also not be liable as stated previously should Owner require pet be allowed access to outdoors with an invisible fence system.

- Pet Owner is responsible for supplying the necessary, safe equipment/supplies needed for care of their pet(s), including but not limited to a sturdy, well-fit collar for walks or in case of emergencies, firmly affixed vaccination tags, leash, pooper-scoopers/ baggies, litter boxes, crate, cleaning supplies, medicines, pet food, and cat litter. Pet Owner authorizes any purchases necessary for the satisfactory performance of duties. Pet Owner agrees to be responsible for the payment of such items, as well as service fees for obtaining items, and will reimburse Paws Plus Pet Sitting Service within 14 days for all purchases made.
- Pet Owner will be responsible for all medical expenses and damages resulting from an injury to a Pet Sitter, or other persons, by the Pet. Customer agrees to indemnify, hold harmless, and defend Paws Plus Pet Sitting Service, in the event of a claim by any person injured by the Pet.
- It is suggested that arrangements be made with someone to evacuate and/or care for your pets in case of a disaster, weather related event or crisis. Paws Plus Pet Sitting Service will definitely try to see to your pets safety/care should such events occur, but cannot guarantee it.
- This contract to be permits Paws Plus Pet Sitting Service to accept all future telephone, online, mail or email reservations and provide service without additional signed service agreements.
- In the event of personal emergency or illness of Pet Sitter, Client authorizes Pet Sitter to arrange for another qualified person to fulfill responsibilities of pet care, if another qualified person is available.
- Paws Plus Pet Sitting Service may use their discretion to stop and end service at any time that a pet poses a danger to the safety or health of itself, other pets, other people, or the Pet Sitter. If concerns prevent the Pet Sitter from continuing for a pet, the Owner authorizes the pet to be placed in a kennel, or previously arranged locale if possible. All subsequent charges, including but not limited to transportation, kenneling, tranquilizing, treating, accessing, and liability, are to be the responsibility of the Owner.
- Paws Plus Pet Sitting Service agrees to provide agreed upon services in a manner that is trustworthy, caring and dependable. In consideration of the services as an express condition thereof, the client expressly relinquishes any and all claims against the company and its employees, except those arising from negligence.
- Paws Plus Pet Sitting Service has my permission to make a copy of my key(s) for emergency / backup purposes at their discretion.
- Paws Plus Pet Sitting Service agrees to place an identifying code on my keys. My keys will not be marked with my name, address, or pet's names. When not in use, my keys will be stored in a secure location by the pet sitter. My keys will be returned to me at the end of each service period, unless I agree in advance to have my keys retained by Paws Plus Pet Sitting Service for future services. Paws Plus Pet Sitting Service has permission to provide my keys to any of its employees and/or ICs that will be providing me with Pet Sitting Service.
- Client agrees to discuss any concerns with Paws Plus Pet Sitting Service within 24 hours of return after service.

Veterinary Release

- In the event that any of my pets appears to be ill, injured, or at significant risk of experiencing a medical problem at the start of service or while in the care of Paw Plus Pet Sitting Service, I give permission to Paws Plus Pet Sitting Service to seek veterinary service from a veterinarian or a veterinary clinic. My preferred veterinary services are listed on each individual Pet Information Disclosure. Other veterinarians or emergency care clinics chosen by the pet sitter are acceptable.
- I understand that efforts will be made to contact me regarding any treatments, illness, injury, or potential problems as soon as the condition is deemed not life threatening and/or contact is possible. I understand that Paw Plus Pet Sitting Service care providers work hard to prevent accidents and injuries, and that such problems may occur no matter how well a pet is cared for. I agree to allow Paws Plus Pet Sitting Service care providers to use their best judgment in handling these situations, and I understand that Paws Plus Pet Sitting Service and its staff assume no responsibility for the actions and decisions of the veterinary staff, the health, or death of my pet(s).
- I will assume full responsibility for the payment and/or reimbursement for any and all veterinary services rendered, including but not limited to diagnosis, treatment, grooming, medical supplies, and boarding.

Such payments will be made within 14 days of the initial incident. I also agree to be responsible for all fees assessed by Paw Plus Pet Sitting Service for emergency transportation, care, supervision, or hiring of emergency caregivers, and will pay such fees within 14 days of each incident.

- I further authorize Paws Plus Pet Sitting Service and my primary veterinarian(s) to share all of the medical records of all of my animals with veterinary clinics in an emergency in the interest of providing the best care for my ill or injured animal(s).
- This agreement is valid from the date below and grants permission for future veterinary care without the need for additional authorization each time Paws Plus Pet Sitting Service cares for one or more of my pets. I understand that this agreement applies to all of the pets within the care of Paws Plus Pet Sitting Service. By signing this contract, I agree that I have the sole authority to make health, medical, and financial decisions regarding the animals that will be scheduled to receive service.
 - This agreement is valid from the date signed, and replaces any prior Service Agreements. Client agrees to any future Paws Plus Pet Sitting Service Agreement/Terms of Service changes relayed verbally to the client, mailed or emailed in writing to the client, or posted on our website.
 - The owner states that he/she as read this agreement in its entirety and fully understands and accepts its terms and conditions.

Client/Owner Name (Please Print): _____

Client Signature: _____ Date: _____

CLIENT INFORMATION

Client Name:	
Address:	
Home Phone:	
Cell Phone:	
Work Phone:	
Email:	
Preferred Contact Method:	
Referred By:	

EMERGENCY CONTACT INFORMATION

Emergency Contact Name:	
Phone:	
Cell/Work:	
Relation:	
Location:	

HOME GUIDE

Locations:

Crated Area/Cage	
Leash/Collar	
Brushes	
Food Dish	
Food	
Water	<input type="checkbox"/> Tap <input type="checkbox"/> Filtered <input type="checkbox"/> Bottled
Water Dishes	
Medications	
Treats	
Litter Box	
Poop Scoop	
Kitchen Waste	
Outside Waste	
Recycle Bin	
Wet Paw Towels	
Paper Towels	
Cleaning supplies	
Broom/Vacuum	
Where to put mail	
Indoor Plants	

Usual Vehicles & Visitors At Home:

Would you like me to rotate lights/blinds/? Y N

Would you like me to email you updates during your trip?
Y N

Will anyone else have access to your home while you are away? Y N

Would you like me to set out your garbage on garbage day? Y N

Do you have any plants that need to be watered? Y N

Garbage Day:

Alarm Instructions:



Paws Plus Pet Sitting Service – Pet Information Disclosure

Please complete one form per pet. This form is two pages. Please be sure to indicate Client/Owner and Pet Name on each page.

Client/Owner Name:

Breed:

Physical Description:

Pet Name:

Sex: M / F Declawed: Y/N Neutered: Y / N

Birth date: Or Age:

Weight: Or Size:

Microchip/Tattoo/Dog Tag #:

Feeding Instructions:

Feed apart from other pets/supervise Dispose of uneaten food Remove food after _____ minutes

<input type="checkbox"/> Dry	Brand:		Times normally fed:	Procedure:
	Amount:		<input type="checkbox"/> Bowl always full <input type="checkbox"/> 6am-10am <input type="checkbox"/> 11am-1pm <input type="checkbox"/> 2pm-4pm <input type="checkbox"/> 5pm-7pm <input type="checkbox"/> 8pm-11pm	
<input type="checkbox"/> Wet	Brand:		Times normally fed:	Procedure:
	Amount:		<input type="checkbox"/> Bowl always full <input type="checkbox"/> 6am-10am <input type="checkbox"/> 11am-1pm <input type="checkbox"/> 2pm-4pm <input type="checkbox"/> 5pm-7pm <input type="checkbox"/> 8pm-11pm	
<input type="checkbox"/> Medication(s):	Amt:		Times normally given:	Procedure:
	Location:		<input type="checkbox"/> anytime <input type="checkbox"/> 6am-10am <input type="checkbox"/> 11am-1pm <input type="checkbox"/> 2pm-4pm <input type="checkbox"/> 5pm-7pm <input type="checkbox"/> 8pm-11pm	
<input type="checkbox"/> Medication(s):	Amt:		Times normally given:	Procedure:
	Location:		<input type="checkbox"/> anytime <input type="checkbox"/> 6am-10am <input type="checkbox"/> 11am-1pm <input type="checkbox"/> 2pm-4pm <input type="checkbox"/> 5pm-7pm <input type="checkbox"/> 8pm-11pm	
<input type="checkbox"/> Water	<i>Water will be cleaned and filled frequently</i>		<input type="checkbox"/> Tap <input type="checkbox"/> Bottled <input type="checkbox"/> Filtered	Dish Location:
				Water Location:
<input type="checkbox"/> Treats	Notes:			

Client/Owner Name:

Pet Name:

Pet's Living Area:

<input type="checkbox"/> NOT allowed outdoors at all <input type="checkbox"/> ONLY allowed outdoors on leash <input type="checkbox"/> Turn out, invisible fenced yard with collar <input type="checkbox"/> Turn out, secure fence <input type="checkbox"/> NOT allowed indoors	<input type="checkbox"/> Allowed on furniture, beds <input type="checkbox"/> Restrict to pet area/crate when pet is alone Restricted Area/Crate Location: Other off-limit areas:
--	---

Emergency Care:

Vet Name:

Pet Allergies:

Clinic Name:

Does your pet have food allergies? yes no

Phone:

Pet Medical History: (ongoing or reoccurring known illnesses/injuries, treatments & medications)

Temperament/Personality: _____

Pet Doesn't Like:

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Baths | <input type="checkbox"/> Hot Days | <input type="checkbox"/> Sharing Food Dishes |
| <input type="checkbox"/> Toenail Clip | <input type="checkbox"/> Rain / Snow / Cold | <input type="checkbox"/> Loud Noise / Vacuum / Garbage Disposal / Thunder |
| <input type="checkbox"/> Strangers | <input type="checkbox"/> New Animals | <input type="checkbox"/> All Humans |
| <input type="checkbox"/> Touch Ears | <input type="checkbox"/> Other family pets | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Sprays | <input type="checkbox"/> People near food dish | |

Pet reacts to the above by: _____

Has Pet Ever:

Describe (even if mild, or under extreme/unusual situations)

- Attacked someone/bit someone
- Attacked another animal
- Injured self /escaped out of fear
- Injured self out of boredom
- Escaped from home,

Where does he/she like to escape to?
How can he/she be retrieved?

Commands: (Please list any commands or tricks that your dog knows):

Favorite Games, Toys, and Activities:

Comments: