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| C:\Users\PC\Desktop\Pet Sitting 4 Comfort\249377_995995373824354_3002084865768471199_n.png  PS4C! Founders: Steve & Hong-An San Miguel  Established: March 2016  Fully Insured, Family Owned & Operated  Pet Sitting & Dog Walking Registration Packet |
| www.PetSitting4Comfort.com |

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| **Pet Sitting & Vet-Tech Services and Pricing Guide:**  **Free In-Home Consultation:** to see if you and your pet(s) are compatible with us! We strive to create a long-term relationship with our clientele and to give you peace of mind knowing your pet(s) are being cared for by experienced animal lovers.  **Overnight Pet Sitting:** Nightly rate: Starting at $70\*  \*No additional pet fee as rates vary by distance   * Your pet will avoid the emotional and physical stress of being in a kennel, boarding facility or "dog hotel". * 9 hours of fun and loving care overnight/morning (between 11 pm – 8 am) * 15 to 30-minute afternoon & evening visits * Your sitter will care for your home and feed, water and clean up after your pet. * Your pet can maintain their normal daily routine.   Services Included:   * Medication administration of any type: pills, eye drops/ointments, transdermal, injections (subcutaneous, intramuscular) shots and fluids * Pooper Scooper (front lawn, backyard) * Daily email/text update with your pet(s) picture   Complimentary Services:   * [Bronze PAWSpa Grooming Package\*](https://www.petsitting4comfort.com/grooming) included FREE if we stay with your pet(s) longer than 10 days, otherwise it's available at a 15% discount (subject to availability) and will automatically upgrade them to our Platinum PAWSpa Grooming Package ($75 value) if we stay longer than 20 days with them.   ​  **Drop-In Visits (Dog Walking/Cat Visits) & Vet-Tech Services:** Rates: Starting at $15 per visit\*  \*No additional pet fee as rates vary by distance  Services included:   * Retrieval mail/packages/newspaper, watering plants and alternating lights/curtains * Maintaining your pet’s normal routine of exercise, feeding, and playtime in the safety and comfort of their own home environment * 15 to 30-minute walks per visit to keep your pet’s weight under control and become more relaxed when you arrive back home * Continuation of any undergoing training session(s) * Medication administration of any type: pills, eye drops/ointments, transdermal, injections (subcutaneous, intramuscular) shots and fluids * Cleaning litter boxes * 10% discount on at-home grooming services * Daily email/text update with your pet(s) picture   ​  **Grooming Services:**  **At-home services:** get 10% discount for drop-in visits, cat visits, and dog walking   $5   Ear Cleaning, Hair Removal & Plucking (by request only)   $8   Face Trimming & Eye Stain Removal   $10 Nail Trim (finished with grinding to help smooth out the rough edges)   $10 Anal Gland Expression   $10 Sanitary Trim   $25 Mini-Trim Package (Face Trim, Eye Stain Removal, Pad Shaving, Sanitary Trim, Nose/Pad Cream)   $30 Mini-Quad Package (Nail Trim, Ear Cleaning, Sanitary Trim and Anal Gland Expression)  **\*Bronze PAWSpa Package ($40 value)**  - Bath with Shampoo & Conditioner  - Premium Shampoo (You Pick 1):  ▢ Quadruped Yucca Multi-Purpose Tearless Shampoo  ▢ Quadruped Economy Shampoo  ▢ Quadruped Facial & Puppy Tearless Shampoo  - Deep Coat Conditioner:  ▢ Quadruped All-In-One Leave-In Conditioner  - Blow Dry (towel warmer available for anxious pets that are afraid of loud noises)  - 15 to 30-minute brushing  - Nail trim (finished with grinder to help smooth out the rough edges)  - Ear cleaning, hair removal & plucking (by request only)- Anal gland expression  - Teeth brushing + breath freshener  - Bandana, ribbon or bow tie  Please check out our website for the full list of grooming packages/services at [**www.petsitting4comfort.com/grooming**](http://www.petsitting4comfort.com/grooming)  I have read and understand the above services and pricing. I understand that Pet Sitting 4 Comfort may modify these rates from time-to-time, in its sole discretion, and that all up-to-date policies, prices, etc. can be found on their website at www.PetSitting4Comfort.com.  **⮽ Printed Name:** Click here to enter text. **Date:** Click here to enter text.  **It is essential that you provide all of the information below so that we have the correct contact information on file. Please note Pet Sitting 4 Comfort (PS4C!) uses email to send invoices and confirmation of reservations or cancellations. Please be sure to provide a valid email address. If any of the information below changes, please contact us so we may update your records.** |

**Client's Information**

Name: Click here to enter text. Date: Click here to enter text.

Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip: Click here to enter text.

Home Phone: Click here to enter text. Cell Phone: Click here to enter text.

Work Address: Click here to enter text. Work Phone: Click here to enter text.

Email Address: Click here to enter text.

**Which phone number is best to contact you during business hours?**

Click here to enter text.

**Secondary Owner\*\*Authorized to schedule service & make decisions regarding the care of your pet(s)\*\***

Name: Click here to enter text.

Work/Home/Cell Phone: Click here to enter text. Email: Click here to enter text.

**Emergency Contact \*\*In the event that the Primary or Secondary contacts are unreachable\*\***

Name: Click here to enter text. Home/Work/Cell: Click here to enter text.

**How did you hear about Pet Sitting 4 Comfort?** Click here to enter text.

**\*\*More than one pet? Please complete the following pages for each pet in your household\*\***

**Pet Information**

Pet's Name: Click here to enter text. Species: Click here to enter text. Breed: Click here to enter text.

M/F: Click here to enter text.Age: Click here to enter text.Birthday:Click here to enter text. Weight: Click here to enter text. Color: Click here to enter text.

Spayed/Neutered: Click here to enter text.

Veterinarian's Name: Click here to enter text.

*We must also have a copy of vaccination records from your vet for our records!*

Rabies: Click here to enter text. Distemper: Click here to enter text.

Bordetella: Click here to enter text. Fecal Test: Click here to enter text.

Heartworm Preventive: Click here to enter text. Flea & Tick: Click here to enter text.

**Pet's Behavior**

Has your pet ever bitten someone? Click here to enter text.

Has your pet been socialized or had any formal training? Click here to enter text.

How would you describe your pet's personality? Click here to enter text.

Is your pet aggressive? Click here to enter text. with large pets? Click here to enter text.

with food? Click here to enter text. with small pets? Click here to enter text.

with toys? Click here to enter text. with people? Click here to enter text.

Please note any of your pet's habits that we should know about: Click here to enter text.

Does your pet know any cues that you would like us to use out on walks? Click here to enter text.

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| **Feeding Instructions** | **Medication Instructions** |
| Allergies?  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | Health Issues (Past or Current)?  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |
| Morning  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | Morning  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |
| Midday  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | Midday  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |
| Evening  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | Evening  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. |

**General Instructions**

1. Best places to park? Are parking passes or permits needed?

Click here to enter text.

2. Where will your pet be when upon arrival (crated in bedroom, free roam of the house, in kitchen)? Any places in your home where you pet may hide?

Click here to enter text.

3. Where should we leave your pet at the end of the visit?

Click here to enter text.

4. Locations of leashes, litter boxes, carriers, etc

Click here to enter text.

5. Location of food and treats

Click here to enter text.

6. Location of cleaning supplies

Click here to enter text.

7. Location of trash for pet waste

Click here to enter text.

8. Do you have specific instructions for walking in extreme weather (heat, cold, rain, snow)? Please describe.

Click here to enter text.

**Key Handling Form:**

After the initial consultation, please provide us with 1 set of keys. If you live in an apartment complex, please provide us with a key pass to enter and exit your building.

**I have provided Pet Sitting 4 Comfort with the following:**

* **Number of keys and doors the open:**

Click here to enter text.

* **Home security system information**

□ Where is the security system keypad location? Click here to enter text.

□ Alarm code + additional keys to enter before or after the code: Click here to enter text.

□ How long do we have before the alarm is triggered? Click here to enter text.

* **Describe any special instructions that are helpful for someone who has never accessed your home (such as door sticks, never lock deadbolt, hide-a-key location, or security card to access your building).** Click here to enter text.
* **If apartment building, and sitter will need concierge assistance for access, what are concierge hours?** Click here to enter text.

**I furthermore agree to and understand the following:**

* Pet Sitting 4 Comfort does not make backups of client keys.
* Client keys will automatically be retained on file, at the end of service. If client requests keys to be returned, we shall return keys at end of service either in person or hidden in designated location of the home.
* If client wishes to supply Pet Sitting 4 Comfort with new keys, we can pick up keys at a designated date/time.

**⮽** Client Signature: Click here to enter text. Date: Click here to enter text.

Printed Name: Click here to enter text.

**Vet Information and Release Form**

Name of Vet/Clinic: Click here to enter text.

Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text.Zip: Click here to enter text.

Phone: Click here to enter text.

This facility offers emergency service after regular hours: Y/N? Click here to enter text.

**Name of After Hours Facility, if different than above:**

Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text.Zip: Click here to enter text.

Phone: Click here to enter text.

I understand that in the event of an emergency, Pet Sitting 4 Comfort will make every attempt to contact me. In the event that I cannot be reached, I authorize the following:

In the event of illness or injury, I authorize Pet Sitting 4 Comfort to seek appropriate medical treatment for my pet. I understand that every effort will be made to take my pet to the vet clinic specified on the emergency form if the situation permits however; Pet Sitting 4 Comfort has the authority to seek treatment at any veterinary clinic.

Furthermore, I agree to reimburse Pet Sitting 4 Comfort within 14 days of incident for veterinary fees and all related costs including transportation in any amount up to

**⮽** $ Click here to enter text. **(please specify dollar amount per pet. Common amounts are $200, $1000, or unlimited).**

This release does not expire and will remain valid for all future Pet Sitting 4 Comfort services.

**⮽** Client signature: Click here to enter text. Date: Click here to enter text.

Printed Name: Click here to enter text.

**Pet Sitting & Dog Walking Service Agreement:**

Client desires to engage Pet Sitting 4 Comfort, SP, it's members and representatives ("Pet Sitting 4 Comfort) to obtain the care and services provided by Pet Sitting 4 Comfort (the "Services") for Client's pet(s) (the "Pets"), and Pet Sitting 4 Comfort agrees to provide services in accordance with the terms and conditions of this Service Agreement (the "Agreement").

In consideration of the following terms and conditions, and other good and valuable consideration hereby acknowledged by the parties hereto, Client and Pet Sitting 4 Comfort agree as follows:

1. Client authorizes and engages Pet Sitting 4 Comfort to perform the Services as set forth herein and in the price sheet provided to Client (the "Price Sheet") for the time period(s) as requested by Client ("Scheduled Period"). During any Scheduled Period, fees for Services will be calculated pursuant to the Price Sheet, which may be modified from time-to-time by Pet Sitting 4 Comfort in its sole discretion. If Client determines that any Services scheduled during the Scheduled Period are no longer required, Client must notify Pet Sitting 4 Comfort promptly, and in no event less than the period of time specified in the Price Sheet to avoid being charges any such Services.

2. In the event of an emergency (e.g., injured pets, severe weather, broken pipes, natural disaster, fire, etc.), Pet Sitting 4 Comfort is hereby authorized to take all measures deemed necessary or advisable by Pet Sitting 4 Comfort in its sole and absolute discretion in caring for Pets and Client's property (including without limitation emergency veterinary care for Pets and emergency repair for Client's home) and Client agrees to defend, indemnify and hod harmless Pet Sitting 4 Comfort, its respective members and affiliates from all liabilities, claims and expenses, including reasonable attorney fees, that arise from or relate to such decisions. In the event of such an emergency, Client shall immediately reimburse Pet Sitting 4 Comfort for expenses incurred, plus any additional fees or expenses for attending such an emergency. Furthermore, Client is responsible for providing keys to access their home or building. Any locksmith fees incurred as a result of providing faulty keys is the financial responsibility of the Client.

3. Client shall promptly pay all invoices from Pet Sitting 4 Comfort and may be required to pay certain fees in advance as determined by Pet Sitting 4 Comfort. Late fees, handling fees for returned checks and other fees shall be payable as set forth in the Price Sheet. Client shall pay interest charges at the lesser rate of one and one-half percent (1.5%) per month or the maximum rate permitted by law on past due invoices. Client will be responsible for all costs and fees associated with collection proceedings, including attorneys’ fees, for all amounts more than forty-five (45) days past due.

4. Client represents and warrants that Pets are currently vaccinated in accordance with all local and state laws and regulations. Client agrees to indemnify, defend and hold harmless Pet Sitting 4 Comfort , its respective members and affiliates from all liabilities, claims and expenses, including reasonable attorneys fees, that arise from or relate to Pets’ behavior, including without limitation property damage, personal injury or death caused by Pets.

5. PET SITTING 4 COMFORT PROVIDES NO REPRESENTATIONS OR WARRANTIES, EXPRESS OR IMPLIED, WITH RESPECT TO THE SERVICES AND DISCLAIMS ANY AND ALL IMPLIED WARRANTIES, INCLUDING THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. IN CONSIDERATION OF THE SERVICES AND AS AN EXPRESS CONDITION THEREOF, THE CLIENT EXPRESSLY WAIVES AND RELINQUISHES ANY AND ALL CLAIMS AND LIABILITIES OF ANY KIND AGAINST PET SITTING 4 COMFORT ARISING FROM OR RELATING TO THE SERVICES OR THIS AGREEMENT, EXCEPT THOSE ARISING FROM THE GROSS NEGLIGENCE OR WILLFUL MISCONDUCT OF PET SITTING 4 COMFORT . WITHOUT LIMITING THE FOREGOING, IN NO EVENT SHALL PET SITTING 4 COMFORT BE LIABLE FOR ANY SPECIAL, INCIDENTAL, INDIRECT OR CONSEQUENTIAL DAMAGES OF ANY KIND IN CONNECTION WITH THIS AGREEMENT, EVEN IF PET SITTING 4 COMFORT HAS BEEN INFORMED IN ADVANCE OF THE POSSIBILITY OF SUCH DAMAGES; IN NO EVENT SHALL PET SITTING 4 COMFORT ’S TOTAL AND AGGREGATE LIABILITY HEREUNDER EXCEED THE AMOUNT PAID BY CLIENT TO PET SITTING 4 COMFORT HEREUNDER.

6. Either party may terminate this Agreement at any time for any reason or no reason by providing the other party with notice of such termination. This Agreement constitutes the entire agreement between the parties in connection with the subject matter hereof and supersedes all prior and contemporaneous agreements, understandings, negotiations and discussions between the parties, whether oral or written. The validity, construction and performance of this Agreement shall be governed by and construed in accordance with the substantive law of the Commonwealth of Virginia, without regard to conflicts of law provisions. If any provision of this Agreement or the application of any such provision shall be held to be contrary to law, the remaining provisions of this Agreement shall remain in full force and effect to the maximum extent permissible.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the date first written above.

**⮽** Client Signature: Click here to enter text. Date: Click here to enter text.

Printed Name: Click here to enter text.