

## **Critter and Home Care**

14196 N Bright Angel Trail, Marana, AZ 85658 CritterandHomeCare@gmail.com www.CritterandHomeCare.com (719) 839-5891

This signed document is an agreement between	Critter and Home Care and
(Client) for pet care services	s beginning ending
, and thereafter on an as-needed	
provide pet care services to Client in a reliable, t	
The client requests the following during the abo	<u> </u>
visits per day on the first day	morning mid-day evening
visits per day on the days in between	
visits per day on the last day	morning mid-day evening
PET CARE:	
1) I (Client) authorize Critter and Home Care to p	perform pet care services as outlined in
Client Profile, Pet Profiles, and Policy and Proced contract.	dure, which shall become part of this
2) If a pet becomes ill while under the care of Crirepresentative of Critter and Home Care to trans who is available) if this is needed in his/her best representative to approve any emergency treatr (unless otherwise stated in Veterinarian Release any charges incurred. I release Critter and Home to transportation, treatment, and expense.	sport my pet to my veterinarian (or one judgment. I authorize said ment recommended by the veterinarian Form) and I agree to pay promptly for
PAYMENT:	
1) Pet care services will be provided at the rate of	of
\$per visit	
x total number of visits	
= sub total	i mouiode amonife.
+ for any Holiday occurring durin	• • • • • • • • • • • • • • • • • • • •
discounts, coupons, gift certific = total due	.ales
total due	

Rates for subsequent services are subject to change.

2) I agree to reimburse Critter and Home Care for any additional fees for tending to emergency or veterinary care as well as any expenses incurred for any other unexpected home, food, or other supply needs. I also agree to reimburse Critter and Home Care for







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additional time accrued at the rate of \$ per hour in the case of such an emergency.		
3) As a first-time client, I agree to pay the deposit of% of total and leave payment (in a predetermined spot in my home) for the balance at the first visit of that scheduled service or send payment to Critter and Home Care by the		
start of the first visit. receive and invoice for the balance at the first visit of that scheduled service and send electronic payment to Critter and Home Care within 3 days of return home. I understand that if there is an unpaid balance of over ten (10) days for pet care, Critter and Home Care reserves the right to discontinue caring for my pets until balance is paid in full. There will be% per month interest charge on any balance due beyond 10 days of your return.		
4) If I arrive home early I have the right to decide if I wish Critter and Home Care to continue to care for my pets or not, but I understand that FULL payment is still due as Critter and Home Care has reserved this time slot in order to care for pets.		
5) I understand that if my absence must be extended Critter and Home Care requires direct confirmation by phone or text for the unscheduled visits. This is to avoid the possibility of missed messages which could result in interrupted care of my pets.		
LIABILITY:		

- 1) Customer expressly waives and relinquishes any and all claims against Critter and Home Care, its employees, and associates, except those proven to be arising from negligence on the part of Critter and Home Care.
- 2) Critter and Home Care, company owner, agents, assigns, successors and heirs are not liable and are completely indemnified for any and all liability stemming from the act(s) or failure to act of third parties, whether known or unknown, including but not limited to, friends, neighbors, relatives or other service persons., that shall enter your residence for any purpose while Critter and Home Care is caring for your pets. List the names and phone numbers of people with access and permission to enter your home in the designated area on the following page.







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- 3) It is expressly understood and agreed that Critter and Home Care shall not be held responsible for any damage to Client's property, or that of others, caused by Client's pet(s) during the period in which the pets are in the care of Critter and Home Care . I also agree that it is my responsibility to notify Critter and Home Care of any pet that has ever caused an injury to any human or other pet.
- 4) If a pet has a history of biting or other aggressive behavior, Critter and Home Care reserves the right to refuse service. Bites must be reported to the local authorities as provided by law. The owner will be liable for the representative's medical care expenses and damages that result from an animal bite.

<ul><li>5) I attest to the fact that all licenses and value and City in which I reside and/or the County</li><li> ( initial here)</li></ul>		
FUTURE SERVICES:		
I AUTHORIZE THIS AGREEMENT TO BE VALII	ID APPROVAL FOR FUTURE SERVICES	SO AS
TO PERMIT CRITTER AND HOME CARE TO A	ACCEPT MY TELEPHONE OR EMAIL	
RESERVATIONS AND ENTER MY PREMISES V	WITHOUT ADDITIONAL SIGNED CONT	<b>FRACTS</b>
OR WRITTEN AUTHORIZATIONS. Key on file	e (initial here)	
I have read and agree to the aforementione this service agreement. I have been provide completed and signed the required veterina	ed with a signed copy for my records.	•
Signed	Date	
Critter and Home Care Representative	Date	_



