



# Reptile Sitting Form

Customer Name			
Phone + Email			
Home Address			
Pet's Name			
Species		Age/Gender	
Preferred Contact (text, call, email, etc.)			
<b>Requirements</b>			
Feeding (Food type, how often, etc.)			
Enclosure (Temp, humid, light, etc.)			
Handling (if required)			
Things to avoid			
Medical Conditions			
What should we do, in case of an emergency, with your animal?			
Emergency Contact			
Preferred Vet			
<p>Cole's Crested Geckos is happy to take care of the needs and welfare of your pet(s). Local customers can take advantage of our boarding service for \$5.00 a day, per animal. Care instructions, food, and all other supplies must be provided by the owner and payment in full is due at the time of pickup.</p> <p>We will contact you immediately when there are concerns about the animal's health. We must receive your approval to act. Unless declined, signing below authorizes Sara Skopljak to act as your agent in the event your animal needs medical attention. As the pet owner, you assume any costs related to veterinary care.</p> <p><u>Check all that apply:</u></p> <p><input type="checkbox"/> The care instructions provided on this sheet are complete</p> <p><input type="checkbox"/> I understand I must pay \$5 a day per animal</p> <p><input type="checkbox"/> I decline the need for any veterinary care</p>			
Owner Signature		Date	