MUDDY PAWS PET CARE

Day Visits/In-Your-Home Overnight Pet Sitting



TODAY'S DATE:						PET NAME(S):								
CLIENT INFORMA	ATION													
Client(s): #1										How did you hear about us?				
Address:	ddress:						City:			State: Zip:				
Email address #1:						Email address #2:								
Cell Phone #1:			Ce			Cell Pho	Cell Phone #2:							
HOME CARE INFO	ORMA'	TION												
COURTESY SERVICES	OURTESY Bring in News-		lights Shades indo		Water indoor plants	Water outdoor plants Bird feeders Radio		Lit bo	l ()ther	Recycling/ Garbage		tional notes/ ments		
#1 PET INFORMA	TION													
Pet's Name:				Age:			Male 🗌			emale	Spayed Ne		utered 🗌	
Type of Pet:	Type of Pet:			ed/Color/V	Weight:		I				Current Vaccin	urrent Vaccinations: Y N		
Vaccinations on record with your curren (Please include a copy of current vaccinations)								ed: Y	Y N Is pet micro-chipped:			: Y 🔲 N 🔲		
Separation Anxiety: Y \(\subseteq \text{N} \subseteq			What helps with the anxiety?											
How long have you had your pet?			Was your pet a rescue: Y N N					V	Was your cat ever feral? Y \(\square\) N \(\square\)					
Feeding Instructions (amounts, times per day, etc.):									Is your pet p	Y 🗌 N 🗌				
Health Concerns/Food Allergies:									Does your p	Y 🗌 N 🗌				
Medications:									Is your pet allowed on furniture?			Y 🗌 N 🗍		
Quirky Behaviors:									Is your pet of	crate trained?		Y 🗌 N 🗌		
Where does your pet sle	Where does your pet sleep at night?									Does your pet chew?			Y 🗌 N 🗌	
#2 PET INFORMA	TION													
Pet's Name:	Pet's Name:			Age:			Male			emale	Spayed Neutered		utered 🗌	
Type of Pet:			Breed/Color/Weight:			,					Current Vaccin	Current Vaccinations: Y N		
Vaccinations on record with your current (Please include a copy of current vaccina						Flea/Tick/Heartworm treated: Y				N	Is pet micro-ch	cro-chipped: Y 🔲 N 🔲		
Separation Anxiety: Y \(\sum \) N			What helps with the anxiety?											
How long have you had your pet?			Was your pet a rescue: Y ☐ N ☐ Was your cat ever feral? Y ☐ N							N 🗌				
Feeding Instructions (amounts, times per day, etc.):									Is your pet potty-trained?			Y 🔲 N 🔲		
Health Concerns/Food Allergies:										Does your p	oet "mark" inside	?	Y 🗌 N 🗌	
Medications and Dosages:									Is your pet allowed on furniture?			Y 🗌 N 🗌		
Quirky Behaviors:						Is your pet crate trained?					Y 🗌 N 🗌			
Where does your pet sleep at night?						Does your pet c				et chew?		Y 🗌 N 🗌		
MORE PETS or MORE INFO?		PL				KSIDE (FO COMI PETS.	PLETE	24	1	

DOG WALKING SERVICES								
Command used to go potty:	Does your dog come when called? Y \(\sum \) N \(\sum \) Does your dog know his/her name? Y \(\sum \) N \(\sum \)							
How does your dog walk on a leash								
1	er dogs, cats or small animals? (Please include mealtime, walks, socially.)							
LOCATION OF IMPORTAN	T ITEMS							
Item	Location							
Leash/cat carrier/crate/bags:								
Pet food and treats:								
Cleaning supplies:								
Disposal of litter box contents:								
Thermostat:	Breaker box:							
PET BEHAVIOR AND SAFE	TY OF PET SITTER							
(initial) I certify that unsigned, please explain:	my pet has not harmed or shown aggressive or threatening behavior toward any person or any other animal. If							
	TOR THAT THE PET SITTER SHOULD BE MADE AWARE OF IN ORDER FOR THE PET SITTER TO BE							
SAFE AT ALL TIMES: (For example: Cat will bite if tummy is rubbed; or, dog growls if you try to take away his toy.)								
	ER BEEN IN AN ALTERCATION WHERE YOUR DOG OR THE OTHER DOG WAS INJURED?							
PLEASE EXPLAIN:								
TRIPS TO PARKS/HIKES/OT	HER?							
Yes No (initial) M	UDDY PAWS PET SITTER HAS OWNER'S PERMISSION TO TRANPORT PET TO PARKS/TRAILS FOR							
LEASHED HIKES. All dogs will be	leashed on hikes and will be covered under Muddy Paws' insurance.							
OTHER:	OWNER'S INITIALS:							
CLIENT KEYS								
	sets of Client keys on file to simplify arrangements for future visits. One set will be kept in a home office safe, and							
the other set will travel with the p	et-caregiver. If you do not release two sets of keys and a locksmith is obtained due to a lock-out, loss of key, or key							
breaks, you are fully responsible factorial hidden key outside the house.	for the fees rendered by a locksmith. If you prefer, you may release one key and share with pet sitter the location of a							
Please initial one of the following (You must initial one of the following statements for this contract to be valid): I release two sets of keys, or one key if there is only a deadbolt.								
	of one key it there is only a deadboit. If have shared with pet sitter the location of a hidden key or will give Garage/House Keypad Code:							
I release one key and am fully aware that it is my responsibility to pay for all fees associated with obtaining a locksmith so that the pet service agreement may not be compromised while I am away.								
Also, please initial one of the fol								
_	o Muddy Paws to retain on file. I may revoke this release at any time, at which time my keys will be returned.							
	to return my house keys after the current service is completed I understand there is a \$10 fee for Muddy							
Paws to make an extra trip to return keys post-service. (Please include in payment.) If keys are to be left after last scheduled visit in or near the client's home, or with neighbor, please indicate:								
Note: It is not advised for owner to direct Muddy Paws to leave key locked inside house in the case that client incurs a delay in return and pet sitter cannot get back inside the house without a locksmith to extend the date of service.								
DO ANY NEIGHBORS HAVE A K If so, please provide name/phone/ei	EY TO YOUR HOME IN CASE OF SEVERELY INCLEMENT WEATHER? \[Y \] N nail:							
*Please Note: If anyone else has ac	cess to your home while the pet sitting job is being performed (other than for an inclement weather situation),							
	y for any damages or losses to your home or pet(s).							
CAMERAS/ALARM SYSTEM	IN YOUR HOME?							
Yes No CAMERA LOC	EM Access Code: Alarm Instructions:							

Location of Bed:		Linens/Towels:							
Instructions for Bedding/Towels post	t stay:								
Indicate what Pet Sitter may use:	TV: Y 🔲 N 🔲	W/D: Y] N 🗌	Dishwasł	ner: Y 🔲 N 🗀]	Fridge: Y	□ N □	
Wifi:	Passw	ord:							
EMEDGENCY CONT. OT IN	FORMATION								
EMERGENCY CONTACT IN 1) Name:	Email:				Cell:				<u></u>
,									
Address:					Relationship:				
2) Name:	Email:				Cell:				
Address:		Rela							
MEDICAL EMERGENCY SERV	ICES								
Veterinarian's Name/Clinic:	ICLS	Phone:			Address:				
Please describe any known medical of	or physical problems, i	ical problems, including allergies:							
Emergency Medical Care. If, in ou									
Yes Initial By initialing Paws, and its employees ("Muddy Pacare including, but not limited to, translated to authorize Veterinarian and/or treatment options to Muddy Paws should be shou	nsportation to/from the Veterinary Office nam ould veterinary care be person(s) cannot be re Initial	pe solely responsed and all responsed veterinary climed above or E enecessary in reached to appropriate No Limit	nsible for the ibility for classic and choise mergency V my absence. The improvement of the ibility of the ibi	e payment of aims, damage ce of veterinary serv assessed fees	all medical bill s, and/or debts a rian and animal rice to provide s, please indicat	ls for yo arising o I hospita informa	out of or relal.	my pet's he	medical
2 Services agreed upon with N	Muddy Paws:							1	
	ne overnight care		pricing can aws.pet/pet	be found on -services.	our site at				
☐ daily v	risits/walks		pricing can aws.pet/pet		on our site at			-	
3 All payments must be p Acceptable forms of payment Venmo: For all other Mudd	nt for services rende	ered by Tamal	l Riedman:					it card, or	

TERMS OF CONTRACT

Please read carefully and initial each section in order for this contract to be valid for all services from the date of first service and for all future services rendered by Muddy Paws, or until contract is

Muddy Paws agrees to permanently keep your Service Contract on file for current and all future services provided.

It is recommended that you make a copy for your personal files.