



**BestWay.**  
PET CARE

Telephone: (512)693-8594

Email: [bestwaypetcare@gmail.com](mailto:bestwaypetcare@gmail.com)

Website: [www.bestwaypetcare.com](http://www.bestwaypetcare.com)

## SERVICE AGREEMENT

### *Terms and Conditions*

1. Best Way Pet Care agrees to provide pet sitting, dog walking, and other applicable pet care services in a reliable, caring, and trustworthy manner. In consideration of the services and as an express condition thereof, the client expressly waives and releases Best Way Pet Care from any and all claims against the company, its owners, employees, and representatives, except those arising from negligence or willful misconduct on the part of Best Way Pet Care.
2. Client agrees to notify Best Way Pet Care of any concerns within 24 hours of completion of services.
3. Client agrees to pay all charges accrued for services rendered. Client understands that payment is due at or prior to the time of the commencement of services unless there are specifically agreed upon supplementary payment terms.
4. Client will incur a \$50.00 charge or ½ the total amount of the check (whichever is greater), for each returned payment in addition to any and all bank fees attributed to the returned payment. A 15% per month finance charge will be added to unpaid balances after 30 days
5. Best Way Pet Care shall exercise all precautions against sickness, injury, escape, loss, accidents, or death of Client's pet(s). Best Way Pet Care is not responsible for sickness, injury, escape, loss, accidents, or death of Client's pet(s) unless caused through negligence or willful misconduct on the part of Best Way Pet Care. Client agrees that outdoor enclosures have been made secure and escape proof prior to the commencement of services.
6. Client represents and warrants that pet(s) are currently vaccinated in accordance with local, state, and federal law and regulations and that their pet(s) vaccination tag is secured to their pet(s) collar or harness.
7. Best Way Pet Care will follow the directions of the Veterinary Release Form in the case a pet should become injured or sick.
8. Client accepts responsibility for all medical expenses and other damages resulting from an injury to the Pet Sitter, other persons, or other animal(s) caused by Client's pet(s) or negligent act.
9. Client agrees to indemnify, hold harmless, and defend Best Way Pet Care in the event of a claim by any person injured or otherwise damaged by Client's pet(s) or negligent act.
10. Best Way Pet Care reserves the right to charge a cancellation fee of 100% of the fee for scheduled visits for services cancelled with less than 24 hours' notice prior to the scheduled services; a cancellation fee of 50% of the fee for scheduled visits for services cancelled 24 to 48 hours prior to the scheduled services; a cancellation fee of 20% of the fee for scheduled visits for services cancelled 2 to 7 days prior to the scheduled services.
11. Best Way Pet Care reserves the right to terminate this contract at any time if the Pet Sitter, in his/her sole discretion, determines that the Client's pet(s) poses a danger to the health or safety of itself, other pets, other people, or the Pet Sitter. If concerns prohibit the Pet Sitter from caring for the pet, Best Way Pet Care will attempt to contact the Client to arrange alternative care. If the Client cannot be contacted, the Client authorizes Best Way Pet Care to place the pet in a licensed kennel with all charges and fees arising to be the responsibility of the Client.
12. Best Way Pet Care reserves the right to refuse service to any client, at any time, for any reason.



13. This document gives Best Way Pet Care and its representatives authorization to enter the Client's listed address as needed to perform agreed upon services.
14. Client expressly gives Best Way Pet Care the authority to employ a locksmith on their behalf and to promptly reimburse Best Way Pet Care for all costs incurred in the event of a malfunction of the lock, keys, or automatic door opener.
15. Best Way Pet Care is not liable for any loss or damage in the event of a burglary or other crime that should occur while under this contract.
16. Client agrees to properly secure the home prior to leaving the premise and to provide proper access information to be used by Pet Sitter. Best Way Pet Care will re-secure the home to the best of its ability at the end of each visit.
17. In the case of an emergency, inclement weather, or a natural disaster, the Client authorizes Best Way Pet Care to use reasonable judgment for the care and well being of Client's pet(s) and residence. Best Way Pet Care will make reasonable efforts to maintain service during these conditions but reserves the right to adjust the schedule of service based on the sole discretion of the Pet Sitter.
18. Best Way Pet Care is not responsible for any damages beyond the control of the Pet Sitter.
19. Client is responsible for supplying the necessary equipment and supplies needed for the care of their pet(s) including, but not limited to, a sturdy, well-fit harness or collar and leash for walks or in case of emergencies, pet food, medications, identification tags, litter boxes, cat litter, and cleaning supplies. Client authorizes any purchase necessary for the satisfactory performance of duties. Costs of all purchases and related service fees will be reimbursed to Best Way Pet Care within 7 days of purchase.
20. Unless instructed otherwise Client authorizes the use of pet(s) pictures on website, social media, and/or marketing materials for promotional purposes.
21. Client authorizes this contract to be valid approval for services so as to permit Best Way Pet Care to accept all future in person, telephone, text, app, online, or email reservations, and provide services without additional signed contracts or written authorizations.
22. The Terms of this document apply to all pet(s) owned by the Client, including any and all new pets that the customer obtains on or after the date this document was signed.
23. This contract is entered into in the County of Travis and State of Texas which shall be the venue and jurisdiction for any and all disputes which may arise between the parties.
24. Client agrees to provide and keep updated their Client Contact and Emergency Information Sheet which shall be incorporated as part of this agreement.
25. Client agrees to use and abide by all further terms, agreements, and costs as set forth in the Precise Petcare App (<https://bestwaypetcare.pet.ssl.com>) which terms are incorporated into this agreement by reference.

I have read the above terms and conditions. I know, understand, and agree to all terms stated above. By signing below, I am accepting this document as a contractual agreement.

\_\_\_\_\_

Printed Name

\_\_\_\_\_

Date

\_\_\_\_\_

Signature



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PETCARE

**CLIENT CONTACT AND EMERGENCY CONTACT INFORMATION**

**Client Information**

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Name

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Address

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Cell Phone Number

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Work Phone Number

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Email Address

**Emergency Contact Information (Primary)**  
*(if Client cannot be reached)*

**Emergency Contact Information (Secondary)**  
*(if Client cannot be reached)*

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Name

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Name

---

Address

---

Address

---

Cell Phone Number

---

Cell Phone Number

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Relationship to Client

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Relationship to Client



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**Veterinary Release Form**

**Vet / Clinic Information:**

Hospital Name: \_\_\_\_\_  
Veterinarian Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Name of After Hours Facility**, if different than above: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**To the Veterinarian Hospital:**

I have contracted with *Best Way Pet Care* to perform pet services and *Best Way Pet Care* has my permission to place my pet(s) in your care in case of an emergency. *Best Way Pet Care* will contact me as soon as medical care is deemed necessary. However, in the event I cannot be reached immediately, I authorize you to treat my pet(s) and I will be responsible for payment of any fees as stated below. **Please file a copy of this form with my records.**

**Pet Owner Name:** \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

I \_\_\_\_\_ agree to the following:

- In the case of an emergency, I understand that Best Way Pet Care will make every attempt to contact the primary owner and emergency contact.
- If no contact can be reached, I authorize Best Way Pet Care to seek appropriate medical treatment for my pet(s).
- I understand that every effort will be made to take my pet(s) to the above Veterinarian, however, I authorize Best Way Pet Care to seek treatment for my pet(s) at any appropriate clinic, if necessary.
- I give permission to Best Way Pet Care to approve treatment up to:  
 No limit     \$250     \$500     \$1000     other \$\_\_\_\_\_
- I authorize Best Way Pet Care and the Veterinarian caring for my pet(s) to share all medical records of my pet(s) with emergency vet clinics in an effort to provide the best care possible.
- I agree to assume full responsibility for payment and reimbursement for any and all veterinary services rendered.
- I understand that Best Way Pet Care assumes no responsibility for the loss or injury of any pet(s) and is released from all liability related to transportation, treatment and expenses.

This agreement is valid from the date below and grants permission for all future veterinary care without additional authorization each time Best Way Pet Care cares for my pet(s).

Date \_\_\_\_\_

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Pet Owner Signature

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Pet Owner Printed Name