



**Ally's Cozy Concierge
Services**



COVER PAGE

Ally's Cozy Concierge Master Onboarding Packet












Ally's Cozy Concierge
Services



Premium Pet & Home Care in

Timberwood Park, Stone Oak, Kinder Ranch, Bulverde & Spring Branch

Included Forms

-  Service Agreement
-  Home Care Form
-  Client Intake Form
-  Boarding Waiver & Vaccination Agreement
-  Boarding Checklist
-  Pet Care Notes and  Emergency Contact Sheet
-  Photo Consent Form
-  Medical Power of Attorney for Pets



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SERVICE AGREEMENT — Fillable Version

Client Information

- Name: _____
- Address: _____
- Phone: _____
- Email: _____

Pet Information

- Pet(s) Names & Breeds: _____
- Ages: _____
- Weights: _____
- Medical Conditions: _____
- Medications: _____

Services Requested

- Drop-In Visits
- Overnight Care
- Live-In Care
- Boarding
- Doggy Daycare
- Pet Taxi (Pick up from your home/Drop Off or Take to Groomer or Veterinarian) Provide Info: _____
- Airport Transfer – Provide Pick Up Date/Time Outbound/Return _____
- Other: _____

Service Dates: _____

Client Signature: _____ Date: _____

Caregiver Signature: _____ Date: _____



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HOME CARE FORM — Fillable Version

- Water Plants (Inside/Outside/Both?)
- Lights You Prefer Left On/Off
- Alarm System Instructions (code, arm/disarm steps, quirks)
- Garage Code/Remote Location
- Subdivision Gate Code / Neighborhood Access Notes / Clicker for Gate
- Door/Lock Instructions (sticky locks, preferred entry door)
- Wi-Fi Information
- Water Shut-Off Location (for emergencies)
- Visitors Expected (Cleaners, Landscapers, Pool Service, etc.)
- Trash Days
- Check Mail
- Other Instructions' Notes



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CLIENT INTAKE FORM — Fillable Version

Client Information

- Name: _____
- Address: _____
- Phone: _____
- Email: _____

Emergency Contacts

1. Name/Phone: _____
2. Name/Phone: _____

Pet Information

- Pet(s) Name(s): _____
- Breed(s): _____
- Age(s): _____
- Weight: _____
- Sex: M F
- Spayed/Neutered: Yes No
- Feeding Instructions: _____
- Treats Allowed: Yes No
- Allergies: _____
- Medications: _____
- Behavior Notes: _____



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BOARDING WAIVER — Fillable Version

Multidog Environment Acknowledgment

I acknowledge that my pet may be around other dogs during boarding.

Vaccination Confirmation **(Please provide Rabies Certificates & Vaccination Records)**

Rabies

DHPP/DAPP

Bordetella

Leptospirosis (recommended)

Flea & Tick Prevention – **Please specify:** _____

Emergency Vet Authorization

I authorize Ally's Cozy Concierge to seek veterinary care if needed.

Agreement Signatures

• Client Name: _____

• Pet Names: _____

• Client Signature: _____ Date: _____

• Caregiver Signature: _____ Date: _____



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BOARDING CHECKLIST — Fillable Version

What to Bring

- Food (labeled)
- Treats
- Medications
- Leash & Harness
- Bed/Blanket
- Toys
- Crate

Required Before Drop-Off or Pick Up

- Vaccination records
- Emergency contacts
- Vet information
- Behavior notes
- Feeding schedule
- Medication instructions



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Drop-Off Notes

Any sleeping arrangement routine?

Veterinary Information

- Name: _____
- Address: _____
- Phone: _____
- Email: _____



PHOTO CONSENT FORM — Fillable Version

1. Authorization

I, _____, owner of the pet described below, hereby grant Alejandra Rolfhus, to use my pet(s) pictures for her Ally's Cozy Concierge Services website.

2. Description of photographs:

Alejandra Rolfhus may take no more than _____ pictures of my pet(s) while she pet sits for me.

- The photographs may be edited, altered, or combined with other images published on her website, and I waive any claims related to such alterations, the right to approve the finished product, and any compensation for such alterations.
- This consent is made voluntarily. I further agree to release and forever discharge the Recipient from any claims in law or equity that I, my spouse, heirs, or personal representatives have or will have arising out of the published photographs.
- I affirm that I am over 18 years of age and have the legal capacity to grant this consent.
- I have read and understood the terms of this Consent Form, and I voluntarily agree with them.

This consent may be revoked by giving written notice to the Recipient.

The pets I own and consent for Alejandra Rolfhus to photograph are:

Pet's Information (Next Page)



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- o Pet(s) Name(s): _____
 - o Species and Breed(s): _____
 - o Age(s) and Sex: _____
 - o Distinguishing Features (markings, color, etc.): _____
-

3. Signatures and Date

By signing below, I acknowledge my understanding of the agreement to the above terms and the impact of this Consent:

Pet Owner's Signature

Date

Pet Owner's Printed Name

Agent's Signature

Date

Alejandra Rolfhus (Ally)

Agent's Printed Name



- I accept full financial responsibility for all services and care administered. I will provide my agent with a credit card number for any expenses incurred.
- Authorization Limit: I authorize my agent to approve veterinary services up to a maximum of \$ _____ with my direct consent. For costs exceeding this amount, my agent or the veterinary clinic must attempt to contact me for approval.

3. Contact Information and Guidelines

• Pet Owner Contact Information:

- Phone(s): _____
- Email: _____

• Authorized Agent Contact Information:

- Phone: (210) 310-5869
- Email: allyrolfhus@allyscozyconcierge.com

• Regular Veterinarian Information:

- Clinic Name: _____
- Veterinarian's Name: _____
- Phone: _____
- Address: _____

• Emergency Veterinarian Information (optional-if regular veterinary is unavailable):

- Clinic Name: _____
- Phone: _____
- Address: _____

4. Signatures and Date

Pet Owner's Signature

Date

Pet Owner's Printed Name

Agent's Signature

Date

Alejandra Rolfhus (Ally)

Agent's Printed Name