



Madeline's Paws and Claws Pet Sitting

Dogs, Cats, Birds, Small Animals, Fish
 Bonded, Insured and Certified
 Member of NAPPS and PSI
 (215) 704-2623 (c), (215) 288-7753 (h)
 madeline@pawsandclawssitter.com
 www.pawsandclawssitter.com

SERVICE AGREEMENT

CLIENT INFORMATION:

Name: _____

Address: _____

Phone #s: _____

Home: _____

Bus.: _____

Cell: _____

Other: _____

Email Address: _____

Vacation departure date - 1st visit _____ Vacation return date – last visit _____

Or, ongoing visits: _____ Daily visits: Day(s) _____ Times(s) _____

Way to reach client in case of an emergency: _____

Who else has keys & phone # _____

PET INFORMATION:

Name	Age	Breed	Sex	Medications	Habits/Traits

Location of:

Food (& Type): _____

Water (tap, Brita): _____

Treats: _____

Litter/Waste Bags/Dust Pan & Brush: _____ Trash Day? _____

Leash/Carrier _____

Would you enjoy texts and photos? Yes [] No [] Client's initials. _____

May we take photos of pet(s) for social media? Yes [] No [] Client's initials. _____

Anything else: _____

Veterinarian Information:

Name: _____

Address: _____

Phone #: _____

Microchip #: _____

May we take your pet(s) to another vet if your vet cannot be reached? Yes [] No [] Client's initials. _____

Additional Services:

Bring in mail &/or newspaper: _____

Rotate lights/ shades up/down: _____

Water plants: _____ How often? _____

Alarm code: _____

keys / sets of keys ___/___ How should the keys be returned? _____ Or, we keep keys ____ Client's initials. _____

(If we need to pick up keys, you will be charged for a visit.)

How did you hear about **Madeline's Paws and Claws Pet Sitting**?

Rate for services:

We do understand situations occur when you need to cancel visits. We ask for 48 hours' notice for a cancellation whether it's for a daily dog walk or multiple pet sitting visits. Our dog walkers/pet sitters will already have your visits on their schedule. If you notify us within 48 hours we will charge for 1 visit. Within 24 hours' notice we will charge for 2 visits. Illness or weather will be excused.

(Payment is due at 1st visit by either cash or a check made out to Madeline, Paws and Claws Sitter.) Client's initials. _____

Date: _____

Signature of Sitter: _____

Signature of Client: _____

Madeline G. Irwin, Owner