

Furever Friends Pet Sitting
Victoria Vento
Bourne, Ma
victoria@yourfureverpetsitter.com
774-454-6938

This contract is an agreement between Furever Friends Pet Sitting (Victoria Vento) and

Client _____ for pet care/training services beginning on (date)
for
(pets) _____ and thereafter on an as-needed basis.

Pet Care & Payment

Pet Care services will be provided at the following rate:

Dog Walking - M-F 9am-4pm - Saturday by appointment only

Check in/out notifications, all walks are GPS tracked and sent to your email upon completion. I provide poop bags & treats!

(unless pet has food/treat allergy or medical condition)

fee includes up to 2 pets

30 minutes - \$30

45 minutes - \$40

60 minutes - \$50

Daily Pet Sitting - 7 days a week

Includes walk / daily activity routine, meal feedings, taking out the trash, adjusting lights, bringing in mail, etc.

30 minutes - \$30

45 minutes - \$40

60 minutes - \$50

Sunday + \$5

Cat Visit

Clean litter boxes daily, feeding, refresh water, bringing in mail, taking out trash, etc.

20 minutes - \$20

Sunday + \$5

Overnight Care - 7 days a week while your away!

Keep your pets at home where they are most comfortable, while sticking to their daily routine! I provide 3-4x daily visits (morning, midday, dinner and late night) for daily exercise, feedings, playtime ect. All visits receive a check in/out notification as well as an email upon completion with photos of our time together.

*** contact for pricing as it varies based on individual needs ***

Basic Obedience Training / Puppy Care

Prices may vary depending on location

****Contact for pricing****

Additional fees may apply to include:

Last Minute Requests

Federal Holidays

After Hours

Weekends

*** Prices effective January 2022 ***

Rates are subject to change without notice

Client authorizes Furever Friends Pet Sitting to perform pet care services as outlined in Client Profile, Dog/Cat Profile and Veterinarian Release, which shall become part of this contract. Prior to any future pet care services, Client agrees to notify Victoria Vento (owner) of any changes to information on these forms.

Payment

Client agrees to make payment in full prior to, or at the time of, the first scheduled visit.

Emergency Care

In the event that pet(s) being cared for requires immediate medical attention, Furever Friends Pet Sitting will attempt to contact the Client prior to obtaining emergency care. However, Client agrees that dog walker/pet sitter has the authority to act in the pets best interest, even if that means seeking medical attention prior to notifying the Client. The Client agrees to reimburse Victoria Vento for any additional fees and/or expenses incurred while tending to emergency or veterinary care.

Key Return Policy

Client may agree to allow Victoria Vento to keep their keys on file in a safe, secure location for future services. Or the Client may agree to have the dog walker/pet sitter limited access to their keys in an accessible, secure location at the Clients home - property.

Locksmith

Client gives Victoria Vento the authority to use the services of a locksmith in the event of a malfunction of the lock, keys or automatic door opener. Client also agrees to reimburse Victoria Vento within 5 days of the incident for all costs incurred, and to hold Furever Friends Pet Sitting harmless for consequences related to the activities of the locksmith.

Cancellation Policy

Furever Friends Pet Sitting maintains a flexible cancellation policy. The Client will **NOT** be charged, and/or reimbursed for any services IF canceled within **24 hours** prior to the start of service(s) Cancellations without atleast 24 hours notice will be charged 50% of services

LIABILITY**Emergency Contact**

Client agrees to provide Furever Friends Pet Sitting with contact information where he/she can be reached while away. Clients will also provide the name and phone number of someone who is authorized to handle any major problems that arise. If Client or designated contact person cannot be reached in a timely manner, Client agrees to accept any decision that Victoria Vento makes in regards to pet care or Clients property.

Vaccinations

Client agrees to provide Furever Friends Pet Sitting with proof of all current vaccinations for all pets. Should pet sitter/dog walker be bitten or exposed to any disease or ailment from Clients animal(s), Client agrees to pay all costs or damages incurred.

Future Services

Client authorizes contract to be valid for any future services without additional signed contracts or written authorization.

The Client states that he/she has read this entire agreement. And understands and agrees to its terms and conditions.

Client Signature & Date

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Client Information

Client(s) Name: _____

Address: _____ Apt. #

Home Phone #: _____

Cell: _____ Work (if applicable): _____

Emergency Contact
(name, phone # and relationship):

Client Email Address: _____

Location of Important Items

Leash / Collar / Harness: _____

Pet Food / Bowls / Treats: _____

Kennel (if applicable): _____

Cleaning Supplies: _____

Client Signature & Date

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Dog/Cat Profile

Dog/Cat(s) name: _____

Birthday(s): _____ Male / Female (please circle)

Breed: _____ Spayed / Neutered (please circle)

Shots up to date: _____

What brand Flea / Tick preventative & last dose:

Is your pet microchipped? YES / NO Microchip #: _____

Registry Company: _____

Is your dog licensed? YES / NO License #: _____

Food / Treat allergies? _____

My dog/cat loves (please list any particular dogs, toys, activities, treats, etc)

My dog/cat dislikes (please list particular dogs, fears, triggers, dietary restrictions, etc)

Veterinary Release Form

Hospital and Preferred Vet Name (if applicable):

Address: _____

Phone: _____

To The Hospital: Please file this form with my records.

Furever Friends Pet Sitting (Victoria Vento - owner) has been contracted to care for my pet(s) and has my permission to place them in your care in case of an emergency. Furever Friends Pet Sitting will attempt to 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 will be responsible for payment of any fees as stated below.

Client name, address and, phone number on file with veterinarian office:

Name of pet(s) on file with veterinarian office:

1. If the above named veterinarian is not available, I agree that another vet in his/her practice may care for my pet(s). If neither of these vets are available, I give permission to Victoria Vento to take my pet(s) to the nearest animal hospital or emergency clinic.
2. I give permission for Victoria Vento to approve treatment up to \$_____ (_____) Initial
3. I understand that Furever Friends Pet Sitting assumes no responsibility for the loss of any pet and is released from all liability related to transportation, treatment, and expense.

Please list any medical / health conditions that need to be considered (if necessary):

This consent for treatment has no expiration date unless otherwise noted.

Client Signature and Date:
