

OVERNIGHT PET SITTING

Client Agreement



Complete Pet Care Animal Hospital and the Pet Sitter accept no responsibility for the security of the premises or loss if other individuals have access to the home during the term of this agreement. The client must inform the Pet Sitter of any individuals who may be entering the premise.

Requested dates for overnight stay : _____ through _____

Client's Name : _____ Pet's Name : _____ Acct # : _____

The in-home overnight pet sitting fee is \$110 per night for up to 3 pets. The overnight fee includes a minimum of: the evening pet care routine between 6-7 p.m, the overnight stay (check-in by 11 p.m.), and the morning pet care routine between 6-7 a.m. We will stay within a 15-minute range of the times stated above. Special accommodations will be discussed with both the Pet Sitter and the Pet Sitting Coordinator. If additional midday walks are needed, an additional fee per midday visit will apply. If there are additional pets, a fee of \$5.00 per pet will be charged.

Keep in mind that your Pet Sitter will have other pet sitting rounds but will be using your home as his/her "home base." The time spent with your pets will vary based on your Pet Sitter's schedule, but will always include the minimum time stated above.

Due to the exclusivity of overnight pet sitting reservations, we must decline any other overnight requests that coincide with your reservation. Therefore, any overnight pet sitting reservation requires a 50 percent nonrefundable deposit at the time of the booking. The full balance is due at the time of booking your reservation.

Pre-visit :

A pre-visit at your home is required prior to your departure. The pre-visit is \$24.00. This is normally a one-time charge as long as your Pet Sitter is available for your future visits. If a new Pet Sitter has the pleasure of serving you and your family, an additional pre-visit will be scheduled. This is to make sure that you and your new Pet Sitter are comfortable with each other and the routine. We take pride in making sure that you always feel comfortable with the Pet Sitter staying in your home.

Sleeping Arrangements :

Please let your Pet Sitter know which room you would like him/her to sleep in during his/her stay. At the end of the pet sitter's stay, Your Pet Sitter will strip the bed and place the linens in the laundry basket.

It is expressly understood that Complete Pet Care Animal Hospital and the Pet Sitter shall not be held responsible for any damage to property of the client or others caused by the client's pets during the period in which they are in the care of Complete Pet Care Animal Hospital and the Pet Sitter.

Complete Pet Care Animal Hospital and the Pet Sitter are not responsible for damages incurred by the pet the escaping because of a faulty leash/collar, a collar that does not fit properly, damaged fences, etc. The client agrees to notify the Pet Sitting Coordinator of any concerns within 24 hours of the last pet sitting visit.

Facilities :

Please let your Pet Sitter know which bathroom he/she can use and shower in and what bath linens he/she should use. At the end of the visit he/she will place all soiled linens in the laundry basket.

Food :

Your Pet Sitter will bring his/her own food but may need to use your refrigerator, stove, microwave, dishwasher, etc. Please let both your Pet Sitter and the Pet Sitting Coordinator know in writing if there are any restrictions.

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TV/Phone/Internet :

Because pets enjoy things like lounging on the couch or TV snuggle time, our Pet Sitters make a point of spending this kind of time with your pets. We request the Pet Sitter be allowed to use household items such as your TV, phone and Internet service while he/she performs this personalized service for your beloved family member. Please let both your Pet Sitter and the Pet Sitting Coordinator know in writing if there are any special instructions or restrictions.

Other :

We understand that each home and daily pet care routine is unique. Please help us care for your home and pets better by letting us know any special instructions that may be unique to your home and/or pets. Please make sure to provide both your Pet Sitter and the Pet Sitting Coordinator with any special instructions in writing.

I, _____, have read, understand, and agree to these terms for Overnight Pet Care provided by Complete Pet Care Animal Hospital. I understand these terms are in addition to the terms outlined in Complete Pet Care Animal Hospital's Pet Sitting Contract.

Signature

Date

Pet Sitter's Name

Pet Sitter's Signature

Date