



Pet Concierge
Trustworthy Reliable Responsible Loving

INTAKE FORM

Hi. Please take a few moments to complete this form. The information will be kept on file as a valuable reference tool for your pet care provider. Please be as complete and thorough as possible. Thank you!

INFORMATION ABOUT YOU

Client name

Address

Home Phone

Emergency Contact

Veterinarian Name

Veterinarian Phone

City/State/Zip

Cell Phone

Emergency Contact Phone

Clinic Name

Clinic
Location

INFORMATION ABOUT YOUR PET

Name

Meals/day

Feeding Times

Additional Pets & Names

Breed

Age

Location of Food/treats

Quantity

Instructions

Medication:

Name of Medication

Dosage / Times Per Day

Special Instructions



Daily Routine:

Example: wake up, activities, bedtime

Special requirements/instructions when going outside

Location of leash/collar

Behavior:

Escape artist: Yes No Special Instructions _____

Fears: Yes No Special Instructions _____

Aggressive History/Biting: Yes No Special Instructions _____

Commands (please check all that apply): Heel Sit Stay Down Come Wait Go Out(side) Go In(side)
Kennel/Crate Leave It Fetch

Additional Commands _____

INFORMATION ABOUT YOUR HOME

Clean up:

Litter box location _____ Waste disposal container location _____

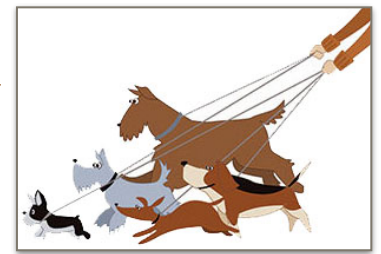
Cleaning supplies location _____ Special clean-up instructions _____

Security:

Security System: Yes No Security Code and/or Garage Door Code _____

Locks:

Front Door Key Garage Door Key Garage Door Opener Extra Key Location _____



Overnight Pet Sitting & Home Care

Please complete the following if you require overnight pet sitting and/or home care.

Date/Time of Departure _____ Date/Time of Arrival _____

Check Mail: Yes [] No [] Mailbox Key: Yes [] No [] Mailbox Number _____

Water plants: Yes [] No [] Special Instructions _____

Take out garbage: Yes [] No [] Day of Pickup/Location _____

Light Timers: Yes [] No [] Location _____ Circuit Breaker Location _____

Gas Company _____ Electric Company _____

Sleeping arrangements / Special Instructions _____

TERMS AND RATES:

Pet/Home Sitting Services:

Pet Concierge takes great pride in the quality and attentiveness of our care. We promise to perform services for the pet/home owner to the best of our ability, with kindness and careful attention to the needs of your pets and home. Pet Concierge promises to give your pet affection and attention, and to follow the care, feeding, and medication instructions outlined herein.

Rates:

_____ Visit(s) Per Day x \$ _____ Per Visit x _____ Number of Days = Total Due \$ _____

Overnight _____ Number of Nights x \$ _____ Per Night = Total Due \$ _____

Terms:

Payment for daily visits is required by the last visit day of the week. Payment for vacation care is required by the first day of Overnight or visit care. Payments more than 5 days late may be subject to a \$5 late fee. Owners are required to provide sufficient supplies for the duration of the service period. If additional supplies are needed, Pet Concierge will purchase them and pet owners agree to reimburse costs plus a \$5 convenience fee. Pet/home owner agrees to notify Pet Concierge and authorize additional visits if he/she is late in returning. Pet owner also agrees to notify, by text, when he/she returns. Once confirmed, we lock your reservation into our schedule. Therefore all fees are non-refundable if service is cancelled less than 24 hours prior to the time your scheduled service is to begin. Thank you for your trust in Pet Concierge!

Pet/home Owner Sign & Date

for Pet Concierge Sign & Date