**PET CARE and DOG WALKING CONTRACT**

**Visits by appointment only.**

Drop off time and date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Collection time and date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of owner \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No: Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Postcode\_\_\_\_\_\_\_\_\_\_\_

Mobile\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pet(s) Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age(s) \_\_\_\_\_\_\_\_\_  Sex?  Male / Female        Neutered?  Yes / No

Breed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unique distinguishing mark / scar \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Identichip Number (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and telephone number of your vet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of last vaccination \_\_\_\_\_\_\_\_\_\_\_ Date of last kennel cough vaccine\_\_\_\_\_\_\_\_\_\_\_\_\_ conditions below

Is your pet insured?     Yes / No    Company and policy number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your pet on any continuous medication?  Yes / No \_\_\_\_\_    If yes, please give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dogs are walked several times a day. Do you wish your dog to be walked? Yes / No

Is your dog socialised with others       Yes / No    Does your dog like to go into water, pond, lake, river. Yes / No

Likes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dislikes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Peculiarities or anything we should know about your pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact Name, Address and Telephone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONDITIONS OF PET HOME CARE**

**We do not look after unneutered dogs and dogs that show signs of aggression and dominance to people and other dogs, that are destructive, are not house trained and cannot be left on their own for up to three hours without excessive barking.**

**1**. No booking will be confirmed until this form has been returned signed, completed and a 20% non refundable deposit paid.  
**2.**In the event of accident, illness, infectious or contagious disease consent is given by the undersigned for a veterinary surgeon to be called and any attention or treatment that is deemed necessary is payable by the animal owner.  
**3.** Whilst every possible care is taken of each animal we cannot be held responsible for loss either from illness or other causes whilst your pet is in our care, or during the transport to and from us. Nor for any of the owner's property which is brought with the pet(s). We have public liability insurance and insurance that covers your pet for accidents whilst in out care.  
**4.** All fees must be paid in advance and expenses which may arise are payable before the pet(s) leaves our care.

**5.** I agree that my dog(s) can have contact with other dogs that may be in your care as well as your family dogs, and that it can be left in the house unsupervised for up to three hours.

**6.** All pets should be fully vaccinated and wormed where appropriate; all dogs should have Vaccination for Parvovirus, Distemper, Hepatitis, Leptospirosis. Kennel Cough at owner’s discretion and risk if not vaccinated. There will be a charge should any pet on arrival require treatment for internal or external parasites (fleas, worms, etc.)  **7*.***Photographs may be placed on the website. Do you object to your pet’s photo going on our website **Yes / No**

**8.**  I agree to the above conditions. I also agree that if my pet is not collected within 7 days of the stated departure date, and no communication has been received from me or my agent, then I authorise you to classify the animal as abandoned and attempt to re-home or send to a charitable animal organization.

Please note: Day of arrival and departure will be charged for. We may refuse to care for any animal which is not suitable for home care.

Everything your pet needs with the exception of water should be provided by the owner, eg. Food, bowls, lead, bedding, crate/cage if used, treats.

I have read and agreed to the above conditions and understand that you provide an unlicensed service and that you are not a licensed boarding kennels.

**PETS ARE ACCEPTED FOR HOME CARE AND WALKING ONLY AT THE OWNERS RISK.**

**CANCELLATIONS: THE WHOLE PERIOD BOOKED WILL BE CHARGED UNLESS 3 WEEKS WRITTEN NOTICE OF CANCELLATION IS GIVEN.**

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_owner        Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**David and Sandra Hayward. Braithwell Road. Maltby, Rotherham, South Yorkshire, S66 8JU 01709 815016**