Overnight In-Home Pet Care Service Request

Dates of stay: _____

Overnight Package Type (Please circle):
Full Day Package / Sleepover Package

Ala Carte Services? (e.g- medication administration, additional walks): _____
_____

Pets that will be in our care: _____

Any recent changes? (e.g- behavior or medical changes, routine or feeding changes, changes to your contact information, changes to your vet info, ect.): _____
_____

Has your pet(s) been exposed to or diagnosed with any contagious illnesses or fleas? (e.g- Kennel Cough, Upper Respiratory Infections, Giardia, or Canine Influenza, ect.):
_____

_____

Are there cameras *within* the home? (please circle) YES / NO

Is the designated sleeping area planned for the pet professional a bedroom?: YES / NO
If no, is the space large enough for a queen-sized air mattress?: YES / NO
Reminder: Cameras *cannot* be within the designated sleeping area.

Is there WI-FI available for the pet professional to use? YES / NO
Password: _____

Are there any restrictions within the home? (e.g- shower usage, oven, refrigerator, ect):
_____

Do you prefer daily communication check ins or the "no news in good news" approach? All pets will receive a digital report card after their visit! _____
Will you be on a cruise or international trip where communication will be limited? Let's create a communication plan- please contact one of our pet professionals!

_____

Reminders:
Pet professionals may have other pets to visit but will be using your home as their "home base" during the duration of these scheduled visits. The time spent with your pet(s) will be prioritized within the daily schedule and there will be a "back-up" pet professional assigned to you for emergencies or any scheduling conflicts. You agree to provide a designated sleeping space for the pet professional; this space can be a furnished room or a space large enough for a Queen

sized air mattress. You agree to provide toilet paper, soap, and hand towels for bathrooms. Finley's Friends LLC and its contracted pet professionals are focused solely on your pet(s) while in your home and will not be responsible for any household chores such as signing for mailing, shoveling/plowing driveways or walkways, and/or maintenance appointments. Receiving normal daily mail and packages is included in your fee. Watering indoor plants can be scheduled for a fee. Finley's Friends LLC is authorized to transport and/or to make temporary alternative arrangements to house and care for pets until you or your agent can retrieve the pet(s) in cases of emergencies. You ***must*** disclose the use of any and all in-home cameras. During the time of service, cameras will not be permitted in the designated sleeping area of the pet professional. You must provide two (2) copies of physical keys. You must designate an agent other than the pet parent authorized to act as an emergency contact for your pet(s). We reserve the right to refuse a pet/family for services for any and all reasons.

Groomer/Flea Treatment Authorization: Client knowingly authorizes Finley's Friends LLC and its contracted pet professionals to initiate flea treatment for all necessary pets at a licensed groomer or veterinarians office at the client's sole expense.

Initials: _____

Veterinary Care Release: Client knowingly authorizes care to ensure the safety and comfort of all pets within the care of Finley's Friends LLC at the client's sole expense.

Initials: _____

Release of Veterinarian Records: Client knowingly authorizes the release of any and all veterinary records to Finley's Friends LLC while their pets are in our care.

Initials: _____

Locksmith Authorization: Client gives Finley's Friends LLC the authority to use the services of a locksmith in the event of malfunction of the lock, keys, or automatic door opener.

Initials: _____

Emergency Contacts/Agents:
Please provide their name, contact number, and their relation to the pet's family. Write Clearly.

_____

_____

By signing below, the client agrees that they have read this agreement in its entirety and fully understands and accepts its terms and conditions.
I have read the above and by signing below, I agree to the conditions listed above:

Client Signature: _____ Date: _____

Print Client Name(s): _____