



Check-Off List

Cash and Check payments **MUST** be in a sealed envelope, in plain view of the Pet Sitter, and not anywhere near the pet's mouth. Failure to make payment prior to services rendered will result in the cancellation of our service.

- Put our Company Name on the guest list with Security.
- Renters – notify your leasing Office / Landlord about us – VERY IMPORTANT!
- Call your Veterinarian ahead of time to let him / her know about your Pet Sitters in case of an emergency.
- Copy of **Proof of Vaccinations** must be provided to Official Dog Walkers.
- When providing a spare key, make sure to test it to make sure it works properly.
- Have extra food and pet supplies available in case your return is delayed.
- Place food supplies in one general area for the pet sitter.
- Close doors to rooms that are off-limits.
- Make sure all doors and windows are closed and locked.
- Make sure all toilet lids are down, washer & drier machines are closed.
- Lock all perimeter doors and gates.
- Be aware that we drive commercial vehicles. Please find out if there are any parking restrictions in your development.**



Payment Options

Cash and Check payments **MUST** be in a sealed envelope, in plain view of the Pet Sitter, and not anywhere near the pet's mouth. Failure to make payment prior to services rendered will result in the cancellation of our service.

- Cash
- Check – Payment must be made **one week in advance**. Please ask your Pet Sitter who to make the check to.
- Credit Card via PayPal - Click on the "Online Payment" tab on the website.
- Dog Walking/Cat Sitting Rates:
 - Weekdays 15 minute visit - \$15 _____(initials)
 - Weekdays 30 minute visit - \$20 _____(initials)
 - Weekend 15 minute visit - \$20 _____(initials)
 - Weekend 30 minute visit - \$25 _____(initials)
 - Holiday surcharge - \$10 _____(initials)
- Dog Boarding Rates – In your home:
 - Economical Sleepover Weekday (Monday through Thursday) - \$70 _____(initials)
 - Economical Sleepover Weekend (Friday through Sunday) - \$80 _____(initials)
 - Premium Sleepover Weekday (Monday through Thursday) - \$90 _____(initials)
 - Premium Sleepover Weekend (Friday through Sunday) - \$100 _____(initials)
 - Holiday surcharge - \$10 _____(initials)
- Dog Boarding Rates – At the Pet Sitter's home:
 - Single Dog - \$40.00 _____(initials)
 - Additional Dog - \$20.00 _____(initials)
 - First puppy not potty trained - \$50.00 _____(initials)
 - Additional puppy, not potty trained - \$30.00 _____(initials)

Notes:

- Valet parking fees will be added to the above rates.



Owner's Profile

Date: _____

1st Pet owner's name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail: _____

Home address: _____

City: _____

State: _____

Zip Code: _____

2nd Pet owner's name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail: _____

Home address: _____

City: _____

State: _____

Zip Code: _____



Important Phone Numbers

Name: _____

Relationship: _____

Phone Number: _____

Name: _____

Relationship: _____

Phone Number: _____

Veterinary Information

Veterinary Name: _____

Veterinary Phone Number: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Account number and name: _____

Veterinary Information - After Hours

Veterinary Name: _____

Veterinary Phone Number: _____

Address: _____

City: _____



The Official Dog Walkers and Pet Sitters

State: _____

Zip Code: _____

Account number and name: _____

Pet Emergency Information

In case of illness or death, do The Official Dog Walkers & Pet Sitters have permission to act in the best interest of the dog? Yes No

Do you wish to be notified? Yes No

Emergency Contact if pet owner cannot be reached: _____

Security Information

Gate/Guard House Phone Number: _____

Travel Information

Departure Date: _____

Arrival Date: _____

Hotel name and phone number: _____

Residential Profile

Cleaning Product/Location - Pet accidents: _____

Broom/mop location: _____

Dust pan location: _____

Vacuum cleaner location: _____

Paper towels location: _____

Toilet paper location: _____



The Official Dog Walkers and Pet Sitters

Trash bags location: _____

Air Conditioner Settings: _____

Trash Collection Schedule:

MON TUE WED THU FRI SAT SUN Night

Security Deterrents

Outdoor Lighting? Yes No

Indoor Lighting? Yes No

Curtains? Yes No

Rotate Vehicles? Yes No

TV / Radio? Yes No

Keys

We highly recommend that you leave the key on file with The Official Dog Walkers and Pet Sitters for future visits (no charge) Yes No

NOTE: There is a key **Return Fee of \$15** if you want us to drop off the key. For your protection (and ours) we do not leave house keys in mail boxes or under the door mat.



Home entry and Mail Pick-Up Authorization

I authorize the Official Dog Walkers & Pet Sitters to enter my home to care for my pet(s) and pick-up my mail.

Pet Owner Name (print)

Pet Owner Signature

Security Information

Access Code Number to enter the community: _____

Mailbox number and location: _____

Garage Door entry code number: _____

Alarm Company name and phone number: _____

IN _____ OUT _____

Secret Password: _____



Dog Profile #1

Dog's Name: _____

Nickname: _____

Sex: Male Female

Date of birth: _____

Breed & Color: _____

Height: _____

Weight: _____

Spayed Yes No

Neutered Yes No

I.D. Tags: _____

Microchip: _____

Tattoo number: _____

Rabies Tag number: _____

Dog Profile #2

Dog's Name: _____

Nickname: _____

Sex: Male Female

Date of birth: _____

Breed & Color: _____

Height: _____

Weight: _____

Spayed Yes No

Neutered Yes No

I.D. Tags: _____

Microchip: _____

Tattoo number: _____

Rabies Tag number: _____



Dog Profile #3

Dog's Name: _____

Nickname: _____

Sex: Male Female

Date of birth: _____

Breed & Color: _____

Height: _____

Weight: _____

Spayed Yes No

Neutered Yes No

I.D. Tags: _____

Microchip: _____

Tattoo number: _____

Rabies Tag number: _____

Toys

Location: _____

Favorite toy: _____

Grooming Stuff

Location: _____



Dog walk/run schedule

Do you take your pet for a walk immediately upon entering the house? Yes No

Average number of walks per day and times: _____

Can your dog maintain a walking, jogging or running pace? Yes No

If yes, which one? _____

Current verbal commands being used? Yes No

Are there any Doogie friends around the neighborhood? Yes No

If yes, where? _____

Are there any Doogie enemies around the neighborhood? Yes No

If yes, where? _____

Behavioral Issues & History

Is dog destructive when parents are out of town? Yes No

Loss of Appetite? Yes No

Separation Anxiety? Yes No

Pee and Poo in the house? Yes No

If Yes, where? _____

Does your dog like to hide? Yes No

If Yes, where? _____

Does your dog vomit often? Yes No

If Yes, where? _____

Does your dog like to chase cars? Yes No

Does your dog have issues with children, men, women, other dogs or cats, etc? Yes No

Does your dog tries to escape when the door is opened? Yes No

Any history of biting? Yes No

Any history scratching? Yes No



The Official Dog Walkers and Pet Sitters

Any other issues not mentioned?

Does your dog like to be carried or picked up? _____

Fears

- Thunder
- Lightning
- Photography
- Other – Explain: _____

Feeding Instructions

<i>Pet Name</i>	<i>Brand & Location of food</i>	<i>Feeding Times</i>	<i>Feeding Instructions / Portions</i>	<i>Medications / Vitamins</i>

All food and water bowls will be thoroughly washed with soap and water after each meal.



Dog Sitting Schedule

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

In the event that your return should be delayed (temporarily or permanently), who have you elected to have full or part time custody of your pet?

I wish to assign _____ to have full custody of _____.

Pet Owner Name (print)

Pet Owner Signature