

CAT VISITING AGREEMENT FORM

NAME.....ADDRESS.....TEL.....MOB.....WORK.....

Cat name.....

Age.....

Breed.....

Sex.....

Spayed/Neutered.....

Cat name.....

Age.....

Breed.....

Sex.....

Spayed/Neutered.....

Cat name.....

Age.....

Breed.....

Sex.....

Spayed/Neutered.....

Cat name.....

Age.....

Breed.....

Sex.....

Spayed/Neutered.....

FEEDING TIMES

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

FEEDING INSTRUCTIONS

SECURITY DETAILS

I (the client) release my house key(s) toRegistered Petsitter for the

duration of the contract. I may revoke this release at any time and expect my keys to

be returned to me immediately upon such revocation.

VETERINARY AUTHORISATION DETAILS

VET'S NAME.....

ADDRESS.....

.....

TEL.....

I hereby give.....Registered Petsitter permission to transport my cat (s) to the above mentioned veterinary surgeon. I understand thatassumes no responsibility for the loss of the cat(s) and is released from all liability related to transportation, treatment and expense.

Client signature..... **Vet signature**.....

Please provide three copies, one for each party.

To the veterinary surgery:

During my absence.....Registered Petsitter will be caring for my cat(s) and has my permission to transport them to your surgery for treatment. I authorise you to treat my cat(s) and will be responsible for payment to you either before my departure or on my return. Please file this form with my records.

START DATE OF SERVICE END DATE OF SERVICE TOTAL DUE NOW £ (please note that this is non refundable)

CONTINUED OVERLEAF.....



Will the cat(s) have access to a catflap?.....

Please note that if the cat is to have access to a cat flap that in the event of the cat going missing the Registered Petsitter will continue with agreed visits, notify the vet, ID chip, insurance and local police but will not be held responsible for the loss of the cat

• Emergency contact

This should be someone who can pay a bill in the event of a problem with the house. This might also be someone who can make a decision about surgery or euthanasia.

• Does the cat have a collar?.....

• Is there a Litter Box?..... If so, how often should it be changed?.....

• Are there any limitations for the cat inside and outside?.....

• Does the cat have any treats or toys?.....

• Precautions (other animals, people).....

• In the event of surgery or euthanasia the Registered Petsitter will accept the advice of the veterinary surgeon, would you wish to be notified before your planned return?.....

• In the event of you not returning from your time away, have arrangements been made for the rehoming of your pet (s)?

• Insurance details

• Micro chip details

• Vaccinations

• Medical history

• Vet details

IN THE EVENT OF A FLEA OR WORM INFESTATION I WILL TREAT THE CAT AT YOUR EXPENSE

Additional notes

Additional instructions, eg. Burglar alarm, water plants, forward post, return messages etc:

I HEREBY CONFIRM THAT I AM THE OWNER OF THE ABOVE NAMED CAT (S) AND THAT I AUTHORISE THE FOLLOWING REGISTERED NATIONAL PETSITTER):

.....

TO ACT AS GUARDIAN DURING MY ABSENCE AND TO TAKE ANY ACTION WHICH HE/SHE CONSIDERS SUITABLE IN ORDER TO PROTECT AND KEEP IN GOOD HEALTH THE ABOVE NAMED CAT(S). I DO FURTHER CONFIRM THAT I WILL BE RESPONSIBLE FOR ANY COSTS WHICH MIGHT BE INCURRED, EITHER VETERINARY OR OTHER, AS A RESULT OF ANY SICKNESS, ACCIDENT OR DAMAGE CAUSED TO OR BY THE ABOVE NAMED CAT (S). EXCEPT THIRD PARTY LIABILITY, AND THAT I WILL PAY ANY SUCH COSTS OR EXPENSES ON DEMAND. I ALSO UNDERSTAND THAT NO LIABILITY WILL ATTACH TO THE ABOVE MENTIONED PETSITTER OR NATIONAL PETSITTERS.

SIGNATURE: DATE: