SMALL ANIMAL BOARDING AGREEMENT FORM

Page 1

			I EL	<i>MOD</i>	WORK	
	Type of Animal	Type of Animal	Type of Animal.		Type of Animal	
	Name	Name	Name		Name	
	Colour	Colour	Colour		Colour	
	Markings	Markings	Markings		Markings	
				an ar ar an ar an	Port V. a	
EEDING TI	EEDING TIMES			<u>SECURITY DETAILS</u>		
MONDAY	TUESDAY WEDNESDAY T	HURSDAY FRIDAY SATURDAY	Y SUNDAY	I (the client) r	elease my house key(s) to Pawprints UK Registe	ered
				Petsitter for th	e duration of the contract. I may revoke this rele	ease at any time
				and expect my	keys to be returned to me immediately upon such	ch revocation.
FEEDING II	<u>NSTRUCTIONS</u>					
/ETEDINADY	Y AUTHORISATION DETAILS	To the veterinary surge	erv:			
VETERMAN		, , , , , , , , , , , , , , , , , , , ,	,.			
			rints Uk Registered Petsitter	will be caring for	my rabbit	
VET'S NAME		During my absence Pawpr				
VET'S NAME		During my absence Pawpr and has my permission to	rints Uk Registered Petsitter	rgery for treatme	nt. I authorise you to	
VET'S NAME		During my absence Pawpr and has my permission to	rints Uk Registered Petsitter transport him/her to your su e responsible for payment to	rgery for treatme	nt. I authorise you to	
/ET'S NAME ADDRESS		During my absence Pawpr and has my permission to treat my rabbit and will be on my return. Please file t	rints Uk Registered Petsitter transport him/her to your su e responsible for payment to this form with my records.	rgery for treatme you either before	nt. I authorise you to my departure or	
VET'S NAME ADDRESS TEL I hereby give P		During my absence Pawpr and has my permission to a treat my rabbit and will be on my return. Please file t	rints Uk Registered Petsitter transport him/her to your su e responsible for payment to this form with my records.	rgery for treatme you either before	nt. I authorise you to	ne rabbit and is
VET'S NAME ADDRESS TEL I hereby give Preleased from a	Pawprints UK Registered Petsitter permiss	During my absence Pawpr and has my permission to a treat my rabbit and will be on my return. Please file t	rints Uk Registered Petsitter transport him/her to your su e responsible for payment to this form with my records. ned veterinary surgeon. I un	rgery for treatme you either before derstand that Pav	nt. I authorise you to my departure or	ne rabbit and is
VET'S NAME ADDRESS TEL I hereby give Preleased from a	Pawprints UK Registered Petsitter permiss	During my absence Pawpr and has my permission to a treat my rabbit and will be on my return. Please file t ion to transport my rabbit to the above mention ment and expense.	rints Uk Registered Petsitter transport him/her to your su e responsible for payment to this form with my records. ned veterinary surgeon. I un	rgery for treatme you either before derstand that Pav	nt. I authorise you to my departure or	ne rabbit and is



NARP SMALL ANIMAL VISITING AGREEMENT FORM CONTINUED Page 2	Additional notes						
How often should cage be cleaned?							
Is animal allowed outside cage? If so, please give instructions							
Does the animal have any treats or toys?							
Preacutions (other animals, people)							
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.							
• 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	IN THE EVENT OF A FLEA OR WORM						
• Vaccinations	INFESTATION I WILL						
Medical history	TREAT THE ANIMAL AT YOUR EXPENSE						
• Vet details							
Additional instructions, eg. Burglar alarm, water plants, forward post, return messages etc:							

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

PAWPRINTS UK

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 RABBIT 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 RABBIT. 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.

