

At Your Pets' Service, LLC

KEEPING YOUR PETS AND HOME SAFE WHILE YOU'RE AWAY!

904-568-2008

Insured & Bonded



INSTRUCTIONS

WALKS: _____

NEIGHBORHOOD DOGS: _____

PLAY TIME: _____

FAVORITE TOYS: _____

HIDING PLACES: _____

POOL: (if applicable) _____

BATH: _____

Additional Notes: _____



Medication: _____



EXTRAS

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Breakfast: _____

Lunch: _____

Dinner: _____

DRY =

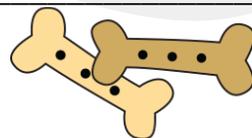
WET =

FOOD



Additional Notes: _____

Additional Notes:



TREATS

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To Whom It May Concern (Veterinary Office/Doctor),

I, _____, hereby authorize *At Your Pets' Service, LLC* (pet sitter) to act on my behalf in regards to paperwork and billing for *pet* when we are not present. Please give me a call as soon as *pet* arrives so I am made aware. Please try to make contact with me to further discuss treatment and medical decisions. If medical intervention is imperative and I am unable to be reached, *At Your Pets' Service, LLC* has full permission and is authorized to sign forms on my behalf and approve charges.

Thank you,

X: _____

Pet Owner

Pet Owner's Phone Number: _____

X: _____

Pet Sitter

X: _____

Vet Office Staff

Vet Offices

PRIMARY

Name: _____

Address: _____

Phone #: _____

Hours of Operation: _____

EMERGENCY

Name: _____

Address: _____

Phone #: _____

Hours of Operation: _____

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Trip Dates: _____

When We Leave: _____

When We Return: _____

How Many Visits Needed: _____

Dates: _____

How Many Overnights Needed: _____

Dates: _____

Where We Will Be: _____

Phone #: _____

Address: _____

TRIP INFO



Additional Notes: _____

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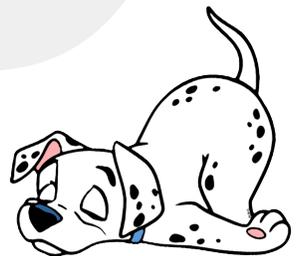
hello.

COMING

bye bye.

GOING

SLEEP



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Name: _____
Birthday: _____
Breed: _____
Gender: _____
Microchip #: _____

PET INFO



Parent: _____

Cell: _____

Email: _____

Parent: _____

Cell: _____

Email: _____

Home Address: _____

Door/s Code: _____

Garage Code: _____

CONTACT INFO



EMERGENCY CONTACTS/NEIGHBORS

Name/Phone #: _____

Name/Phone #: _____

Vet: _____

Dr.: _____

Phone #: _____

Address: _____

Hours: _____

Emergency Vet (24 hours): _____

Phone #: _____

Address: _____

VET INFO

