

# Serene Pet Sitting & Home Watch Services

## Service Agreement & Reservation Form

|                     |  |                               |  |
|---------------------|--|-------------------------------|--|
| <b>Client Name:</b> |  | <b>Reservation Date</b>       |  |
| <b>Home Phone:</b>  |  | <b>Start Date &amp; Time:</b> |  |
| <b>Cell Phone:</b>  |  | <b>End Date &amp; Time:</b>   |  |
| <b>E-Mail:</b>      |  | <b>Name of Pets:</b>          |  |

| Details                                      | Visit Time | Length | Rate | Cost per Visit | # of Visits | Total     |
|--|------------|--------|------|----------------|-------------|-----------|
| Morning                                      |            |        |      | X              | =           | \$        |
| Mid-Day                                      |            |        |      | X              | =           | \$        |
| Evening                                      |            |        |      | X              | =           | \$        |
| Over-Night                                   |            |        |      | X              | =           | \$        |
| Other  |            |        |      | X              | =           | \$        |
| <b>Subtotal</b>                              |            |        |      |                |             | \$        |
| <b>Discounts</b>                             |            |        |      |                |             | \$        |
| <b>Additional Charges</b>                    |            |        |      |                |             | \$        |
| 50% Deposit – due at booking                 |            |        |      |                |             | \$        |
| Remaining 50% – due by 1 <sup>st</sup> visit |            |        |      |                |             | \$        |
| <b>Grand Total Due</b>                       |            |        |      |                |             | <b>\$</b> |

### Vacation Contact Information

|                               |  |  |  |
|-------------------------------|--|--|--|
| <b>Phone</b>                  |  | <b>Destination</b>                     |  |
| <b>Cell Phone</b>             |  | <b>Hotel</b>                           |  |
| <b>E-Mail</b>                 |  | <b>Hotel Phone #</b>                   |  |
| <b>Emergency Contact Name</b> |  | <b>Emergency Contact Phone Numbers</b> |  |

#### Tasks – please check ✓

|   |  |
|---|--|
| <input type="checkbox"/> Walk Dog(s)          | <input type="checkbox"/> Take Out Trash  |
| <input type="checkbox"/> Feeding              | <input type="checkbox"/> Newspaper       |
| <input type="checkbox"/> Medication           | <input type="checkbox"/> Mail            |
| <input type="checkbox"/> Injections           | <input type="checkbox"/> Blinds          |
| <input type="checkbox"/> Clean Litter Box     | <input type="checkbox"/> Rotate Lights   |
| <input type="checkbox"/> Water Indoor Plants  | <input type="checkbox"/> Leave Stereo On |
| <input type="checkbox"/> Water Outdoor Plants | <input type="checkbox"/> Leave TV On     |

#### Special Notes and Other Tasks:

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|------------------------|---------------------------|
| <b>Payment Method:</b> | <b>Paid In Full Date:</b> |
|------------------------|---------------------------|

\*\* Please make checks payable to: Carla Surine

\*\* This request must be confirmed in advance and a **signed copy left for your Pet Sitter.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_