

Arf'n Annie ~ Pet Nanny

Getting to know your best friend(s)

Pet Name(s):

(please include all animals in your home – even if we will not be caring for them)

Name: _____

Breed: _____

B-day *(or approximate age)*: _____

Requires Care: Yes No

Allergies: _____

Medication: Yes No

If yes, details: _____

Name: _____

Breed: _____

B-day *(or approximate age)*: _____

Requires Care: Yes No

Allergies: _____

Medication: Yes No

If yes, details: _____

Name: _____

Breed: _____

B-day *(or approximate age)*: _____

Requires Care: Yes No

Allergies: _____

Medication: Yes No

If yes, details: _____

Name: _____

Breed: _____

B-day *(or approximate age)*: _____

Requires Care: Yes No

Allergies: _____

Medication: Yes No

If yes, details: _____

Contact Details ...

Your Name: _____

Address: _____

Contact: _____ (home)

Contact: _____ (cell)

Contact: _____ (business)

e-mail: _____

Other Contact: _____

Address: _____

Contact: _____ (home)

Contact: _____ (cell)

Contact: _____ (business)

e-mail: _____

Veterinary Contact:

Name: _____

Primary Vet Name: _____

Address: _____

Address: _____

Telephone: _____

Emergency Contact:

(if different from other contact)

Name: _____

Address: _____

Contact: _____ (home)

Contact: _____ (cell)

Contact: _____ (business)

Please turn over ...

for what we should know about your best friend(s)

Access Arrangements...

Preferred visit/walk time: _____

Note: Although every effort is made to accommodate your preferred walk time, there may be times when this cannot be accommodated - we will try to visit/walk as close to the specified time as possible.

How will we access your home: Key Given Code Given Other: _____

Codes: Gate Code Buzzer Code Alarm Code _____

Preferred Door Access: Front Door Back Door Other: _____

Preferred walking route: _____

Getting to know your best friend ...

Please be as detailed as possible here.

Please list known commands (and/or hand gestures) _____

Is stopping/sitting before crossing any street required? Yes No

What are typical bowel habits? _____

What behaviors are not OK and should be corrected (i.e. jumping up on people, jumping on couch, etc.)

Is there anything else we should know? _____

Communication ...

We would like to update you on our visit. What information would you prefer and using which delivery method?

- Arrival (any barking, etc.)
- Bowel movement(s)
- Treats
- Overall energy level
- Behaviours (outside of expected)

(Please choose one communication method only)

- E-mail
- Note left after visit
- Cell phone call after visit
- Evening phone call to home
- No thanks, no update needed

The not so fine print ...

Although every care possible will be taken with your pets(s) and with your home, we cannot be held responsible for any damage, loss, or injury incurred while we access your home or are caring for your pet(s). We reserve the right to refuse service to aggressive, injured or sick animals. All dogs must have up-to-date vaccinations. We will not be responsible for any fines levied against non-licensed dogs. Excellent references available on request ~ word of mouth & referrals welcome. Many thanks! Arf'n Annie ~ Pet Nanny (Anne Milligan 604-230-5720 ~ Anne@ArfnAnnie.com ~ www.ArfnAnnie.com)

Signature

Date