

www.pawsau.com.au admin@pawsau.com.au

0411 095 165

Pet Sitting

Date Service Required: From:				
Client Name:				
Address:				
Phone:	Email:			
Pet Name:	Spe	cies:		
Breed:	Colour:	DOB:	Sex:	
Microchip #:				
Regular Vet Clinic Name:				
Address:				
Phone:				
(Optional)				
Insurance Company:		Policy Number:		
Address:				
Phone:	Email:			

Pets and Wildlife Services AU Pty Ltd

ABN: 46 618 772 839



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Preferred 24 Hour Emergency Veterinary Hospital Name:					
Address:					
	Email:				
(Optional)					
Previous Boarding Kennels Name:					
Address:					
	Email:				
(Optional)					
Previous Pet Sitter Name:					
Address:					
	Email:				
(Optional)					
Groomers Name:					
Address:					
Phone:	Email:				



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Medical Conditions and Me	edications (please include	e dose rate and freque	ncy):	
Emergency Contact Name:				
Relationship to you:				
Address:				
Phone:				
How often would you like y	your pet walked (please r	note our walks are 30 r	mins each time and are	an additional cost):
My pet's food regime cons				
Is there anything else you v	wish to tell us:			
is there universing else you t	wish to tell us			



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We will do our upmost to take care of your pet whilst we are pet sitting. However, sometimes a situation may be
encountered when they need to see a vet. In order for us to get your pet the treatment they need and as quickly as
possible, it is best that we have the necessary contact details and permissions to do so. We will of course contact
you immediately and in the event that we are unable to get hod of you, your emergency contact will be contacted.
The reason we ask for your pet's insurance details is in case of a visit needed to your regular Veterinarian or
Emergency Veterinary Clinic, it helps to pass over these details (if they are not already on your file) so that the
Veterinarian can liaise with the insurance company to see what treatments are covered. This is optional as we are
aware that this is something you can easily sort out on your return.
The reasons we ask for your pet's Groomer details is because sometimes our fury friends can get dirty or matted an
we may need assistance in making your pet look beautiful for your return.
The reason we ask for previous Boarding Facilities contact details are in case of emergency where our Pet Sitter is
not able to continue to attend and no other pet sitter is available, we will first contact you, then your emergency
contact and finally your regular boarding facility to see if they can assist with the care of your pet.
Please read our Policies, Terms and Conditions before proceeding to the next section.
Office Uses
Office Use:

ABN: 46 618 772 839 Pet Sitting



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Have you read and understood our Policies, Terms and Conditions:	YES/NO
Permission to contact your Veterinarian if required:	YES/NO
Permission to contact your preferred Emergency Veterinary Hospital if require	d: YES/NO
Permission to contact your Groomer if required:	YES/NO
Permission to contact your previous Boarding Facility if required:	YES/NO
Permission to contact your Pet Insurance Company if required:	YES/NO
Permission to contact your Emergency Contact if required:	YES/NO
Do you have enough medication for your pet for the duration of pet sitting:	YES/NO
Do you have enough food for your pet for the duration of pet sitting:	YES/NO
Would you like updates and photos of your pet whilst we are pet sitting:	YES/NO
Have keys been provided to us for your home:	YES/NO
Have you provided us any necessary alarm codes or special instructions:	YES/NO
Would you like us to collect your mail:	YES/NO
Would you like us to place your bins out for collection (please provide collection)	on day): YES/NO
D. i. a. No	
Print Name: Date:	
Signature:	

Pet Sitting