



Wags to Whiskers  
Pet Sitters

## Service Request Form

<b>Client Name:</b> _____	<b>Pets:</b> _____
<b>Street Address:</b> _____	_____
<b>City / St / Zip:</b> _____	_____
<b>Best Contact #:</b> _____	_____

<b>Date/Time Service Begins:</b> _____	<b>Frequency:</b> <input type="checkbox"/> Daily <input type="checkbox"/> Every Other Day
<b>Date/Time Service Ends:</b> _____	<i>Note: Cat visits can only be scheduled daily.</i>

Details	Visit Type	Length	Visit Rate	# of Visits	Total
Morning			X	=	
Afternoon			X	=	
Dusk / Night			X	=	
Subtotal					
Additional Charges / Discounts					
<b>Total Deposit Due</b>					<b>\$</b>

<i>How may we reach you while away?</i>	<i>Trip Description /Hotel/ Expected Visitors To Your Home</i>
Phone: _____	
Email: _____	
Other: _____	

<b>Tasks:</b>	<b>Special Notes:</b>
<input type="checkbox"/> Walk Dog(s) and/or Cat(s) Visit	
<input type="checkbox"/> Feed & Water	
<input type="checkbox"/> Medication / Vitamins	
<input type="checkbox"/> Clean Litter Box	
<input type="checkbox"/> Water Plants	
<input type="checkbox"/> Bring in Mail	
<input type="checkbox"/> Adjust Blinds & Lights	
<input type="checkbox"/> Trash to Curb	

This request must be confirmed in advance by **Wags to Whiskers Pet Sitters** and a Signed Copy must left for pet sitter. By submitting this request, I agree to all terms as stated on the Service Agreement.

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