

**KK'S PET SITTING  
CLIENT AGREEMENT AND INFORMATION**

Client Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Emergency Contact Info**

Name

Phone

Relationship

Neighbor Name(s): \_\_\_\_\_

Neighbor Phone #(s): \_\_\_\_\_

Alarm deactivation code: \_\_\_\_\_

Alarm activation code: \_\_\_\_\_

Alarm company name: \_\_\_\_\_

Alarm company phone: \_\_\_\_\_

I agree that I have requested that **KK's Pet Sitting/Andrea Kim** take care of my pet(s).

I agree to pay the charges accrued for the services provided as outlined in this agreement.

Total Charge as Scheduled: \$ \_\_\_\_\_

**I understand that payment is due at or prior to first visit.**

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

Name (please print): \_\_\_\_\_

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

Name (please print): \_\_\_\_\_

**KK'S PET SITTING  
CLIENT AGREEMENT AND INFORMATION**

Date of first visit: _____ / _____ /2010	Date of last visit: _____ / _____ /2010
--	---

Number of visits per day (at rate of \$\_\_\_/visit): \_\_\_\_\_ Number of days: \_\_\_\_\_

Number of overnight stays (at rate of \$\_\_\_/stay): \_\_\_\_\_

Number of nights of pet boarding (at rate of \$\_\_\_/night): \_\_\_\_\_

**Additional Duties**

Please circle your request(s).

*(Reasonable accommodations will be made wherever possible, at no extra charge.)*

Pet Taxi   Mail/Newspaper   Water Plants   Garbage disposal/Recycling

Other \_\_\_\_\_

**Contact**

Where can we reach you?

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Special Instructions**

Do you want us to verify you have returned on time, and continue to visit if we do not hear from you? YES / NO

Would you like us to contact you regularly during the visit? YES / NO

If yes, please indicate by what method and when/how often:

\_\_\_\_\_

\_\_\_\_\_

**KK'S PET SITTING  
CLIENT AGREEMENT AND INFORMATION**

**Additional Notes**

---

---

---

---

---

---

---

---

---

---