

NEW CLIENT PACKET



North Star Pet Care

3113 Highway 93

Darby, MT 59829

(406) 239-5816

(406) 821-2012

www.northstardarby.com / info@northstardarby.com

Thank you for choosing North Star Pet Care!

Instructions:

Please print one copy of the New Client Packet, and complete using a pen. **Unless conditions at your property change in the future, this packet will only need to be filled out once-with your initial service.** This packet can be printed one-sided or two, in black & white or color. Please call us ASAP to arrange a free consult. This allows us to meet your animals, and get oriented to your animals and property and is mandatory before we can commit to caring for your animals and/or property.

The New Client Packet includes:

- Service Request (This is the only form that must be filled out for each new Service Period.)
- Legal Considerations (Sign and return)
- Veterinary Instructions & Release (Fill in amount, sign and return)
- Pet Information Form (Print one copy for each pet; each form is 2 pages, and return)
Horse/Large animal form is separate from pet form. Please fill out appropriate areas of one form for each large animal. (i.e., if feeding, meds, etc. are different please indicate for each animal).
Please complete one Pet Information Form for each pet, litter, or fish tank.
- Home Guide & Contact Information sheets for your Pet Sitter to complete

Have These Items Ready for the Initial Interview:

1. Your signed documents
2. A key. We will provide a keychain and a code (no name will be put on your key)
3. A 2nd key that we can code with permanent ink (we can make this complementary spare).
4. Emergency contact information for yourself, and 2 other contacts
5. A list of items you plan to leave out during pet sitter visits (such as paper towel, medicines, etc)
6. Veterinary contact & medical information (allergies, conditions).
7. Trip information, including Hotel and if you plan to have visitors while away.

North Star Pet Care

Rates & Services

VISIT TYPE	RATE (PER VISIT)						
Initial Consultation	FREE						
Hourly	\$18 1st hour \$16 each addl						
Extended	\$19						
Regular	\$12						
Overnights	\$35 (8 hours) \$11 day visits						
ADDITIONAL FEES	RATE (PER VISIT)						
Travel Charges							
We use Mapquest.com , look up the <u>miles</u> from your home to our main office.	<table border="1"> <thead> <tr> <th>Miles</th> <th>Price</th> </tr> </thead> <tbody> <tr> <td>0-5</td> <td>Free</td> </tr> <tr> <td>Each Mile over 5</td> <td>\$0.25 (25c)</td> </tr> </tbody> </table>	Miles	Price	0-5	Free	Each Mile over 5	\$0.25 (25c)
	Miles	Price					
	0-5	Free					
Each Mile over 5	\$0.25 (25c)						

Specials

\$5 Off Your First Service

New customers only, with 3 or more visits paid.

Collect A \$10 Credit For Every Referral

Every referral that books service with us earns \$10 to your account.

Initial Booking Consultation 30-90 minutes

At this visit we can complete the necessary paperwork, answer questions, transfer keys, and tour your home while discussing detailed instructions on how to care for your pets. This required meeting will be scheduled at least **48 hours** prior to service.

Hourly Care

Minimum 60-70 Mins

Choose 1 hour increments of care. Usually best for "Ranch Calls" with multiple animals.

Extended Visit

Minimum 40-45 Mins

Best for long walks, multiple pet homes, and pets with special diets or special needs. Good for horses & hobby farms, and lawn watering.

Regular Visit

Minimum 10-30 Mins

Our most popular choice. Good for many multiple pet homes, supervised feedings, walks, and play. Most dogs will require 2-4 Regular visits per day. Cats are best with 1 visit per day.

Important Terms

Payment of 50% of total is due before service starts.

A separate **signed & completed Service Request** is also due for each service, before each service start.

With permission you may leave a check in full and the completed Service Request for the first visit. However, **your pet sitter must leave your home** without providing any service if you forget either item.

Refunds & Cancellations

0-48 Hrs	50% of service (no refund of deposit)
2-7 Days	20% of Service total is due (80% refund)
8+ Days	No charge, refund in full

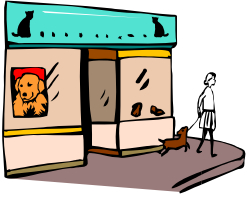
No extra charges for multiple pets.

Please schedule **adequate time to provide the services requested**. If your pet or home needs more time than scheduled, it will be added as needed and billed to you. Nail clippings, yard pickup, watering and other average tasks are included in base price. More difficult tasks are \$3-\$6 extra per 15 minutes.

Miles To Your Home: _____

Your Travel Fee: \$ _____

Your Client ID #: _____



Welcome Visitors & Emergency Personnel:

Our pets are being cared for by a professional who comes in at various times during the day. Please help us provide the best care for our pets by following these special pet care guidelines:

- **If a pet escapes, is injured or ill, or is having any issues please call the pet sitter asap.** The pet sitter does have our emergency contact numbers. In the case of severe injury, please take our pet to the emergency vet clinic.
- Please make it obvious that you are here: park in the front, tape a note to the door, and listen for visitors. The police may be called on unexpected visitors. Always carry ID with you.
- Please do not feed the pets or give them any treats, even nibbles, unless instructed to do so.
- Please return the radio, tv, lights, windows, doors, fans, and locks to their original settings.
- Leave a note before you leave each and every visit. A sheet may be provided. Details can be very brief, but please do mark down if

- Pet was fed treats or food
- Pet was given water
- Plants were watered
- Pet received a hard workout
- Pet went potty, and what time
- Any accidents were cleaned up



Also please mark down your name, arrival and departure times, and any future visits.

- Locate each pet, and check to see that no pets have escaped out the door or into a forbidden area (such as a closet) each time before you leave.

Forbidden Areas & Closed Doors:



Areas that **MUST** remain **accessible** to pet:

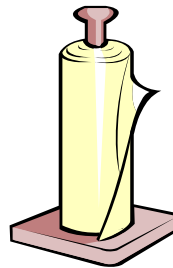
Owner:		Emergency #:	
Pets:		Emergency Contact Info:	
Pet Sitter:	<i>North Star Pet Care 3113 Highway 93 Darby, MT 59829 (406) 239-5816</i>	Other Notes:	

North Star Pet Care

Suggested Leave-Out Checklist



Copy of Service Request, Completed and *Signed*
Muddy Paw Towels or Rags
Paper Towels – 2 rolls
Can Opener & Spoon
Watering Can, Plants (waterproof surface)
Leashes & Harnesses
Medicines, Injection Materials
Name tags & Amount tags on feeding bins
Reminders & Changes
Broom, Dustpan & Vacuum
Carpet Spot Cleaner or Cleaning Machine
General Cleaner
Favorite Toys, Kongs
Brushes & Clippers
Treats & Chewies
Remote Controls for TV or Stereo
Garbage / Litter bags
Extra Litter, Litter Scoop, Pooper Scooper
Additional Contact #'s (Hotel)
Pencil or Pen
Any special last visit notes (leave key, etc).



Call Us:

Feel free to contact your pet sitter to check up on your pets at any time. We try to return all calls the same day, usually between 6 pm - 8:30 pm. If you do not hear back from us in 24 hours, please try again – voice mails do sometimes get lost. Emails are also welcome, and we check our email morning and evening:

info@northstardarby.com

Keys:

If you would like the pet sitter to leave your key or remote on the last visit, please leave a note reading “**Leave Key**” with the date and time of the last visit as well as instructions on how to secure the house without the key.

Remember, if we return the key you will not be able to request additional visits if your return is delayed. Leaving the key or storing it in our safe is free to you. Transferring the key again in the future does incur an additional fee. This includes drop-off, pick-up, or mailing done by either the sitter or the client.

Enjoy your time away!

North Star Pet Care

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North Star Pet Care – Legal Considerations

For the purposes of this document, the terms Client, Owner, Pet Owner, and Customer are synonymous with the person contracting services for one or more domestic animals.

- A **signed Service Request** must be provided to your sitter before service is provided for any period.
- Deposit in full is due at time of reservation. **Reservations are not held** until 50% of the payment is received by North Star Pet Care or special arrangements are agreed upon by both parties in writing. There will be a **\$25 service charge** for each returned check.
- Unpaid service may be cancelled without notice, including prior to or during the service period.
- Cancellation Charge Schedule effective 1/01/2009 (% applies to entire service period total):
 - **0 - 48 hours** prior to any service, and/or Holidays: 50% of total is charged (reservation fee not refunded)
 - **2 - 7 days** prior to service: 20% of service total is due (equals an 80% refund)
 - **8 days** prior to service or more: No charge, refund in full.
- North Star Pet Care is not responsible for wilted, dead or otherwise unhealthy plants. North Star Pet Care will work hard to follow your written directions as precisely as possible, but cannot be responsible if the results are not favorable. ***Please place all indoor plants together on a waterproof surface in plain sight***, as your pet sitter is not responsible for water damaged areas or missed plants.
- North Star Pet Care is not responsible for damage to the home beyond the control of the Pet Sitter. This includes, but is not limited to leaks, electrical problems, and acts of nature. In these situations, the company will attempt to contact the customer and then the emergency contact before making a subjective decision on dealing with the problem. All repairs and related fees (including Special Service emergency service time and coordination fees) will be paid by the client, or fully reimbursed to North Star Pet Care within 14 days.
- North Star Pet Care is not responsible for any damage to property of the client or others unless such damage is caused by the negligent act of the Pet Sitter. North Star Pet Care agrees to remain fully insured through PSA or a comparable entity, including optional Special Property Endorsement (protects against theft, breakage, etc as caused by an employee) or bonding. North Star Pet Care accepts no responsibility for security of the premises or loss if other individuals have access to a client's home, or if the home is not properly secured.
- All other individuals that visit the home will leave a log of their visit.
- North Star Pet Care is not liable for any loss or damage in the event a burglary or other crime that should occur while under this contract. Pet Owner agrees to secure home prior to leaving the premises. North Star Pet Care will re-secure the home to the best of its ability at the end of each visit. While keys are in the possession of a Pet Sitter, they will be either on the Sitter's physical person, or be properly stored an undisclosed location. North Star Pet Care subscribes to insurance coverage through PSA for lost key lock replacements.
- Pet Owner must have legal rights to place the animals in the care of Pet Sitters, Kennels, and Veterinary Clinics. The Pet Sitter cannot service a home with "Visiting" pets or animals that do not belong to the resident of the service site without separate sets of agreement forms, including a Legal Considerations Agreement, accepted and signed by each rightful owner(s).

- The terms of this document apply to all the pets owned by the client, including any and all new pets that the customer obtains on or after the date this document was signed, at any and all locations the owner designates for service.
- Pet Owner is responsible for pet-proofing house and yard, and the security fences/gates/latches. North Star Pet Care will not be responsible for the safety of any pets and will not be liable for the injury, disappearance, death, or fines of any pet with unsupervised access to the outdoors.
- North Star Pet Care is authorized to seek any emergency veterinarian assistance needed during visits, at the cost of the client, from any veterinarian as chosen by the sitter. However, the company is not responsible for the health/well being of the animal.
- Pet Owner is responsible for supplying the necessary, safe equipment/supplies needed for care of their pet(s), including but not limited to a sturdy, well-fit harness (halter, collar, etc...) for walks or in case of emergencies, firmly affixed vaccination tags, a lead rope or leash, pooper-scoopers, litter boxes, food, cleaning supplies, medicines, pet food, and cat litter. Pet Owner authorizes any purchases necessary for the satisfactory performance of duties. Pet Owner agrees to be responsible for the payment of such items, as well as service fees for obtaining items, and will reimburse North Star Pet Care within 14 days for all purchases made.
- Pet Owner will be responsible for all medical expenses and damages resulting from an injury to a Pet Sitter, or other persons, by the Pet. Customer agrees to indemnify, hold harmless, and defend North Star Pet Care in the event of a claim by any person injured by the Pet.
- It is suggested that arrangements be made with someone to evacuate your pets in case of a disaster or weather related event/crisis/"Code Red". North Star Pet Care will definitely try to see to your pets safety/care should such events occur, but cannot guarantee it.
- Future Services: I authorize this contract to be valid approval for services so as to permit North Star Pet Care to accept all future telephone, online, mail or email reservations and enter my home without additional signed contracts or written authorizations.
- North Star Pet Care reserves the right to terminate this contract at any time if the Pet Sitter, in his/her sole discretion determines that Owner's pet poses a danger to the health or safety of itself, other pets, other people, or the Pet Sitter. If concerns prohibit the Pet Sitter from caring for the pet, the Owner authorizes the pet to be placed in a kennel (or previously arranged locale), with all charges (including but not limited to transportation, kenneling, tranquilizing, treating, accessing, and liability) to be the responsibility of the Owner.
- North Star Pet Care agrees to provide services stated in this agreement in a reliable, caring and trustworthy manner. In consideration of the services as an express condition thereof, the client expressly waives and relinquishes any and all claims against the company and its employees, except those arising from negligence. Claims of negligence that involve a hired Independent Contractor, hired by North Star Pet Care, will be the responsibility of the Independent Contractor and the company they represent. All hired Independent Contractors are required to carry liability insurance with optional coverage or bonding through a reputable company.
- Client agrees to notify North Star Pet Care of any concerns within 24 hours of return.
- This agreement is valid from the date signed, and replaces any prior Legal Considerations agreements. Client agrees to any future North Star Pet Care term changes relayed *verbally to the client*, mailed or emailed in writing to the client, or posted on our website under the heading Terms .
- The owner states that he/she as read this agreement in its entirety and fully understands and accepts its terms and conditions.

Client/Owner Name:

Signature: _____ Date: _____



Owner & Address:

Pet(s):

Green and yellow shaded input area for Owner & Address and Pet(s).

Usual Vehicles & Visitors At Home:

Empty box for Usual Vehicles & Visitors At Home.

Snow & Ice Care Instructions / Contacts:

Empty box for Snow & Ice Care Instructions / Contacts.

Locations:

Crated Area

Leash/Collar

Grooming

Food Dish

Food

Water

Tap Filtered Bottled

Water Dishes

Medications

Treats

Litter Box

Poop Scoop

Kitchen Waste

Outside Waste

Recycle Bin

Paw Towels

Paper Towel

Spot Cleaner

Broom/Vacuum

Put Mail

Indoor Plants

Outdoor Plants

Birdfeeders

Vertical list of input boxes for various household items and locations.

Notes & Misc:

Empty box for Notes & Misc.

Key - **MUST TEST**

- Pet Sitter Has Use Code
 Will Mail Unlocked
 Drop off Client Present
 Will Leave Other

Describe Key:

Backup Entry:

Usual Visits

Length

Time Slot

Morning

Afternoon

Dusk

Night

Table with 2 columns: Length, Time Slot. Rows for Morning, Afternoon, Dusk, Night.



North Star Pet Care– Veterinary Release Agreement

VR

In the event that any of my pets or large animals appears to be ill, injured, or at significant risk of experiencing a medical problem at the start of service or while in the care of North Star Pet Care, I give permission to North Star Pet Care to seek veterinary service from a veterinarian or a veterinary clinic. My preferred veterinary services are listed on each individual Pet Information Disclosure. Other veterinarians or emergency care clinics chosen by the pet sitter are acceptable.

I ask North Star Pet Care to inform the attending clinic or veterinarian of my requested total diagnosis and treatment limit of \$ _____ per pet / all pets (most common values are \$200, \$1000, or unlimited). I understand that efforts will be made to contact me regarding any treatments, illness, injury, or potential problems as soon as the condition is deemed not life threatening and/or contact is possible. I understand that North Star Pet Care providers work hard to prevent accidents and injuries, and that such problems may occur no matter how well a pet is cared for. I agree to allow North Star Pet Care providers to use their best judgment in handling these situations, and I understand that North Star Pet Care and its staff assume no responsibility for the actions and decisions of the veterinary staff, the health, or death of my pet(s).

I will assume full responsibility for the payment and/or reimbursement for any and all veterinary services rendered, including but not limited to diagnosis, treatment, grooming, medical supplies, and boarding. Such payments will be made within 14 days of the initial incident. I also agree to be responsible for all Special Service fees assessed by North Star Pet Care for emergency transportation, care, supervision, or hiring of emergency caregivers, and will pay such fees within 14 days of each incident.

of my animals with veterinary clinics in an emergency in the interest of providing the best care for my ill or injured animal(s).

Every dog, cat, and horse at the site of service will be current (per my veterinarians recommendations) on its rabies vaccinations, and DHPP and Bordatella for dogs, or rabies and _____ for cats prior to the arrival of any caregiver. I will also make arrangements to guarantee that each animal will remain current on its vaccinations throughout each service visit period.

I agree to notify North Star Pet Care of any signs of injury or possible illness before any visit as soon as the condition appears. North Star Pet Care reserves the right to cancel service at any location where a pet with a potentially infectious condition exists. North Star Pet Care strives to provide clean, safe service to each of our clients. In doing so, North Star Pet Care strongly recommends that each pet and large animal be vaccinated, dewormed, and protected from harmful insects according to veterinarian recommended standards.

This agreement is valid from the date below and grants permission for future veterinary care without the need for additional authorization each time North Star Pet Care cares for one or more of my pets. I understand that this agreement applies to all of the pets and large animals within North Star Pet Care. In signing this contract, I agree that I have the sole authority to make health, medical, and financial decisions regarding the animals that will be scheduled to receive service.

Client/Owner Name: _____

Preferred Veterinarian/Address/Phone _____

Client Signature: _____ Date: _____

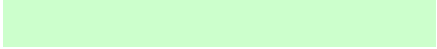


North Star Pet Care – Pet Information Disclosure

PI

Please complete one Pet Information Disclosure form per pet or litter.

Owner:



Name of Friend/Relative/etc. for help if needed:

Address:

Name:

Phone:

Address/Phone:

Vacation/Cell Phone/Contact Info:

Pet Name:

Length of Time Owned:

Pet Type: Dog / Cat / _____

Breed:

Sex: M/F Declawed: Y/N Neutered: Y/N

License #:

Microchip/Tattoo/Dog Tag #:

Physical Description (if similar to another):

Birth date: Or Age:

Weight: Or Size:

Feeding Instructions:

Feed apart from other pets/supervise Dispose of uneaten food Remove food after ____ Min

<input type="checkbox"/> Dry	Brand: Measure with: Amount: Where to feed:	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dusk <input type="checkbox"/> Night	Procedure:
<input type="checkbox"/> Wet	Brand: Measure with: Amount: Where to feed:	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dusk <input type="checkbox"/> Night	Procedure:
<input type="checkbox"/> Medication(s):	Amt: Location: Hide In Treat:	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dusk <input type="checkbox"/> Night	Procedure:
<input type="checkbox"/> Medication(s):	Amt: Location: Hide In Treat:	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dusk <input type="checkbox"/> Night	Procedure:
<input type="checkbox"/> Water	<i>Water will be cleaned and filled frequently</i>	<input type="checkbox"/> Tap <input type="checkbox"/> Bottled <input type="checkbox"/> Filtered	Dish Location: Water Location:
<input type="checkbox"/> Treats	Name: Amt: Location:	Notes:	

Owner:

Pet:

Pet's Living Area:

<input type="checkbox"/> NOT allowed outdoors at all <input type="checkbox"/> ONLY allowed outdoors on leash <input type="checkbox"/> Turn out, invisible fenced yard with collar <input type="checkbox"/> Turn out, secure fence: _____ <input type="checkbox"/> Turn out, no fence, but doesn't leave yard <input type="checkbox"/> NOT allowed indoors	<input type="checkbox"/> Allowed on furniture, counters, beds <input type="checkbox"/> Restrict pet area/crate only when pet is alone <input type="checkbox"/> Restrict pet area/crate at all times Restricted Area/Crate Location: Other off-limit areas:

Emergency Care:

**Placing Credit Card on file at vets office is recommended*

Vet Name:

Pet Allergies:

Clinic Name:

Vaccinations up to date on (month/yr):

Phone:

Heartworm test: Negative / Positive

Pet Medical History: (ongoing or reoccurring known illnesses/injuries, treatments & medications)

Owner: Pet:

Temperament/Personality:

Pet Doesn't Like:

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Baths | <input type="checkbox"/> Hot Days | <input type="checkbox"/> Sharing Food Dishes |
| <input type="checkbox"/> Toenail Clip | <input type="checkbox"/> Rain / Snow / Cold | <input type="checkbox"/> Loud Noise / Vacuum / Garbage Disposal / Thunder |
| <input type="checkbox"/> Massage | <input type="checkbox"/> New Animals | <input type="checkbox"/> All Humans |
| <input type="checkbox"/> Touch Ears | <input type="checkbox"/> Other family pets | <input type="checkbox"/> Strangers |
| <input type="checkbox"/> Sprays | <input type="checkbox"/> People near food dish | <input type="checkbox"/> |

Pet reacts to the above by:

Has Pet Ever:

Describe (even if mild, or under extreme/unusual situations)

- Attacked someone/bitten someone
- Attacked another animal
- Injured self /escaped out of fear
- Injured self out of boredom
- Escaped from home,

Where does he/she like to escape to?
How can he/she be retrieved?

Commands: (Please circle commands we know, and underline commands we are working on):

Sit	No	Outside	Make Poo	Potty	Bad _____	Bath	In the House
Stay	Down	Walk	Food	Who's Here	Good _____	Move	Ride
Come	Lay	Don't Pull	Treat	Back	Drop [it]	Come-on	_____
Heel	Out	Walk Nice	Cookie	Naughty	Don't Touch	Off	_____

Allowed to go for rides in sitter vehicle? Y / N May play with sitter's personal pet(s) for socialization? Y / N

Favorite Games, Toys, and Activities:

Comments:

Client/Owner Name:

Signature: _____ Date: _____



North Star Pet Care – Service Request

SR

Pets

Client Full Name or ID
Best Way to Contact Today
Contact At

Service Begins

 / /

Time

Service Ends

 / /

Time

Daily Every Other Day Weekdays

Details	Visit Time	Length	Rate	Travel Fee	Cost/Visit	# of Visits	Total	
Morning			+		X	=		
Afternoon			+		X	=		
Dusk			+		X	=		
Night			+		X	=		
Subtotal								
Additional Charges								
Discounts								
Grand Total Deposit Due								

How may we reach you while you are away?

Phone:

Email:

Trip Description/Hotel/Notes & Visitors
Expected

Tasks

<input type="checkbox"/>	Email Log	
<input type="checkbox"/>	Walk Dog	
<input type="checkbox"/>	Feed	
<input type="checkbox"/>	Pill / Shots	
<input type="checkbox"/>	Injections	
<input type="checkbox"/>	Plants	
<input type="checkbox"/>	Clean Litter Box	
<input type="checkbox"/>	Take Out Trash	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

Special Notes & Other Tasks

Payment Method

Pay Date

This request **must be confirmed** by my pet sitter, and **a Signed Copy must be left for the pet sitter**. By submitting this request, I agree to all terms as stated on our website: www.northstardarby.com/terms

Signature: _____ Date: _____