



## KCS Referral Pet-Sitting - New Client Form

Your Name \_\_\_\_\_ Best Phone # \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Alt Phone # \_\_\_\_\_ Email \_\_\_\_\_

Spouse/Partner's Name \_\_\_\_\_ Their Phone #/Email \_\_\_\_\_

I prefer my kitty updates via: ☐ Text ☐ Email ☐ Either/Both

Your Vet \_\_\_\_\_ Vet Phone # \_\_\_\_\_

If you cannot be reached, please provide emergency contacts who can decide on a kitty emergency (what to spend, what to do – be sure this person knows your wishes). **Please do not list yourself or anyone traveling with you. Please list at least TWO easily reached, responsible people, who you trust.**

Names: \_\_\_\_\_ Numbers \_\_\_\_\_

Names: \_\_\_\_\_ Numbers \_\_\_\_\_

<u>Kitty Name</u>	<u>Breed</u>	<u>Color/Markings</u>	<u>Age</u>	<u>Sex</u>	<u>Fixed?</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Medical Conditions? (inc. anything sitter might notice so they don't alert you to something already known) **Please note: all medications must be disclosed and agreed upon in advance.**

Do you have an alarm? ☐ Y ☐ N

Do you have cleaners who have access to your home? ☐ Y ☐ N

Does anyone else have access to your house while kitties are under our care? ☐ Y ☐ N

If yes, please explain:

**Feeding Instructions** – Include all food for the day. Please list cat's name, exact quantity of food, and any special instructions (**example, Fluffy gets 1.5 cups dry per day, 5 fish treats, and prefers his food on a flat plate. Bella gets 1 can wet and 5 treats per day**)

**Medications** - Include cats name, name of medication, dosage, and how you normally administer

**Special Loves** - (belly rubs, chasing a ball, etc)

**Additional Instructions** - as they relate to your home (alarm, mail, etc.)

### **THIS AREA MUST BE FILLED OUT & SIGNED BY ALL CUSTOMERS:**

I understand KCS sitters are referred and KCS is not responsible for sitters, nor does KCS insure homes/sitting/sitters. I approve use of this card for each 35% non-refundable deposit, as well as balance due, including any/all unforeseen expenses associated with my pet's care. In the event of concern, KCS and/or sitters may seek veterinarian care and will be reimbursed for any/all expenses including additional time spent caring for cat/s. This card & any others called in/swiped may be used both now and in the future when future sitting is booked. I agree to the KCS sitting system & rate quoted.

**AGREED:**

\_\_\_\_\_  
Owner Signature (or type full name here)

\_\_\_\_\_  
Date

If you prefer, you may call your card details in, but you still must sign above. Sit is not confirmed until credit card information is submitted.

**Select one:**      Visa      Master Card      Diner's Club      (Debit Cards OK)

**Card Number:** \_\_\_\_\_

**Card Expiration:** \_\_\_\_\_

**3 Digit Code:** \_\_\_\_\_

*Please fax, email or drop into our front door slot. Include a detailed itinerary with any hotel contacts, etc.  
A reminder your sitter will need TWO sets of pre-tested keys at the Introductory Visit.*

2/20