

PET SITTING CONSENT FORM

Pet Owner: _____
Address: _____
City,State,Zip: _____
Phone: _____
Expected Date of Absence: _____
Pet's Name: _____

Pet Caretaker: _____
Address: _____
City,State,Zip: _____
Phone: _____

I, the owner of the above-named pet, request that the above caretaker feed, exercise, groom, and provide routine care for my pet as per my oral or written instructions while I am away from home. Should an injury or illness occur to my pet that requires veterinary care during my absence, I authorize the caretaker to act as my agent in procuring essential veterinary medical care, not to exceed \$ _____. I agree to pay for all professional veterinary services after I return and, in the absence of gross negligence, will not hold the caretaker liable for injuries or illnesses suffered by my pet or any fees for veterinary services incurred on my behalf.

I am able to leave my credit card number on file for all services rendered:

Credit card number _____ exp. date _____ 3 digit security code _____

The address and phone number(s) where an agent, relative of mine or I may be reached are:

Name: _____
Address: _____
Relationship: _____
Phone: _____

I authorize the veterinarian to furnish my pet with veterinary care and to provide essential medical services without my consent. I **do** _____ / **do not** _____ (check one) authorize intensive medical efforts for my pet.

In the event the attending veterinarian determines that my pet is suffering and/or is incurably injured, I **give my consent** _____ / **do not give my consent** _____ (check one) for euthanasia. If my pet should die or is euthanized, I request that the body be retained until I return _____, be individually cremated _____, be communally cremated _____ (check one) and I agree to pay the fees for such service.

Signature of Owner

Signature of Caretaker

Date