**CLIENT CONTACT DETAILS:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NAME: |  | | | | |
| ADDRESS: |  | | | | |
| EMAIL: | | | | | |
| Phone: |  | | | | |
| Emergency Contact & Phone Number | |  | | | |
| PET’S NAME | |  | | | |
| BREED |  | | | | AGE: |
| ANY ALLERGIES or MEDICAL CONDITIONS | | | |  | |
|  | | | | | |
| MEDICINE THAT NEEDS TO BE ADMINISTERED | | | |  | |
| YOUR VET |  | | | | |
| Address: |  | | | | |
| Phone: |  | | | | |
| Is your pet’s vaccinations up to date?: | | | Yes  No | | |
| Is your pet Micro chipped?: | | | Yes  No | | |
| Is your pet’s tick and flea up to date?: | | | Yes  No | | |
| Is your pet’s worming up to date?: | | | Yes  No | | |

**LIVE IN CARE (Our Home)**

|  |  |  |  |
| --- | --- | --- | --- |
| Dates to be cared for: |  | | |
| From |  | approx. drop off time |  |
| To |  | approx. collection time |  |
| Number of nights |  | | |
| ***Pricing per night (Deposit 20% required, full payment required on day of drop off)*** | | | |
| **Please check selection** | | | |
| One Dogs $65 Total Payable: | | | |
| Two Dogs $65 Total Payable: | | | |
| Three Dogs $90 Total Payable: | | | |
|  | | | |

**Please note:** - Bookings are not confirmed until the Non-Refundable

booking fee has been paid. (Please see banking details below)

**VISITS TO CLIENT HOME (Deposit Not Required)**

|  |  |
| --- | --- |
| From |  |
| To |  |
| Number of days |  |
| **Please check selection** | |
| 1 visit per day $33 Amount | |
| 2 visits per day $60 Amount | |
| **AND** | |
| Short Walk per day $20 Amount | |
| **OR** | |
| 2 Short Walks per day $35 Amount | |
|  | |

|  |  |
| --- | --- |
| **TOTAL AMOUNT TO BE PAID:** |  |

**DOG WALKING**

Daily visit $30

Daily Visit + Waterfront visit $35

The utmost care will be taken to ensure the wellbeing and safety of your pet. Any unforeseen expenses incurred will be at the owner’s expense.

In order to submit your booking form, you must read and accept our Terms and Conditions.

I have read and understood the Terms and Conditions. (Please check)

**Is there any behavioral / background information that we should be aware of?**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| Client signature: | Date: |
| Print Name: |  |

**Payment details :**

JJ Hancock

NAB Wynnum

BSB: 084468

Acct No: 772846989

Jeffrey Hancock T/As Jeff’s Pet Services

|  |  |
| --- | --- |
| Signature: | Date: |