

# New Client Contract



Name:

---

Address & Access Details:

---

---

Phone:

Secondary Contact:

---

Email Address:

---

Name Of Pet/s:

---

Breed & Age:

---

Council Registration:

---

Health / Injury Information:

---

Desexing & Immunisation Details:

---

Do you agree to off leash walking in permitted areas?

Yes, I Agree

---

Aggressive Behaviour Details (*if applicable*):

---

---

## Terms & Conditions:

We'll provide you with short term care for your pets and look after them as we would our own but we won't be held responsible for anything that is out of our control including injuries, loss or vet bills.

We'll ensure our staff behave in a mature and professional manner and are trained in caring for pets and we will do our very best to ensure the safety of the animals and the general public while in our care.

You agree there are inherent risks with caring for animals and you agree that you are the owner of the animal/s and therefore responsible for any associated costs.

You agree to pay your account within 14 days of receiving an invoice and that we reserve the right to charge administration fees if we have to follow up outstanding debts. You also agree that we can publish information i.e. photos on our public website and through social media.

You agree that 24 hours notice is required for any changes or cancellations to your service or a full fee will be incurred.

Have you read the terms and conditions and agree

Yes, I Agree

Date:

Name:

Signature: