

# FOUR LEGS GOOD!

www.1234legsgood.com (778) 848-5586  info@1234legsgood.com

## DOG WALKING / BOARDING / PETSITTING CONTRACT

**Dog(s) Name(s):**

<b><u>Guardian (Owner) Information:</u></b>		
Name:		
Address:		
Home phone:	Work phone:	Cell:
email address:		
<b><u>Partner/Spouse Information:</u></b>		
Name:		
Home phone:	Work phone:	Cell:
email address:		
<b><u>Should I be expecting anyone at your home or in your home during your absence? Y / N</u></b>		
If yes, who?		
<b><u>Emergency Contacts:</u></b>		
The following contacts should be able to make a decision about the care of your pets, or home, if we cannot reach you in an emergency:		
Name:		
Relation:		
Phone:		
Do they have a key to your home? Y / N		
Name:		
Relation:		
Phone:		
Do they have a key to your home? Y/N		
<b><u>Veterinary Information:</u></b>		
Name of hospital:		
Preferred doctor:		
Location/address:		
Phone	Hours	

## Dog Information

Name:	Breed:
Age / DOB	Male / Female
Spayed / Neutered / Intact	
Colour:	Distinguishing markings:
Micro chipped Y / N	Microchip ID
City / District license number:	
Favourite places to go for walks:	
Groomer:	
Favourite toys:	
Treats:	
Favourite indoor activities:	
Loves:	Hates:
Please list any rooms or pieces of furniture the dog is to be restricted from:	
Please tell us where to find the following:	
Leash	
Collar / Harness	
Crate	
Treats	
Towels	
Hose	
Any special instructions for pick-up or drop-off, including CLEAN UP	
<b>Behaviour:</b> __	
Has your dog ever shown signs of aggression towards a person or other animal (cat / horse / dog? (Includes barking, raised hackles, growling, lunging, barking, snapping, contact bites, etc.)	
If yes, please describe incidents:	
Are there any other behavioural concerns, such as storm or firework phobias, noise phobias, resource guarding behaviour, fear aggression, separation anxiety, bike or car phobia etc.?	
Off leash:	Recall:
Command words:	Bathroom commands:

**Background:**

How many homes?

Abused, neglected?

Level / type of training?

Ever walked with a professional dog walker before? If so, name of walker / company

If so, what is the reason you are no longer using them?

**How did you hear of Four Legs Good Canine Services?:****Medical:**

Any major medical conditions (past or present):

Any impaired vision / hearing:

Any exercise restrictions:

Any food allergies or restricted foods:

**House Security:****House keys:**

*Two copies of your house key is recommended, one copy for daily use, the other kept securely at our office in case of an emergency. All keys are coded and do not have your name or address written on them. If you do not have 2 keys ready for us at our initial consultation, we can make a copy for you for \$5.*

*Coded locks are an acceptable way of entry. However, keys are recommended in case of loss of power, electronic equipment problems or in an emergency.*

Do you want our company to keep a second copy of your key in a lock box at our office? Y / N

Circle door of entry: Front door / Side door / Back door / Garage door

To be locked: Deadbolt / Door handle / Both / Other

**Attached Garage:**

Door leading from garage to house is to be kept: Locked / Unlocked

**Alarm System:**

Set alarm? Y / N

Alarm system panel(s) located:

Alarm company:

Phone number:

*PLEASE DO NOT write alarm code on this contract. Alarm code will be discussed at the first consultation*

**Miscellaneous information:**

**CANCELLATION POLICY:**

- A minimum of 24 hours cancellation notice is required, except in the case of extreme emergency.
- Cancellations given with less than 24 hours notice may be charged at the full rate-

**FEES AND PAYMENT:**

- Please see attached sheet for full description of services offered and fees applied
- Clients are billed by email on the 25th of every calendar month for services provided during the entire calendar month
- Payment by Interac email transfer, cheque or cash (correct change please) is accepted, either left for collection on the day of the walk, or mailed to Four Legs Good at the address on the invoice

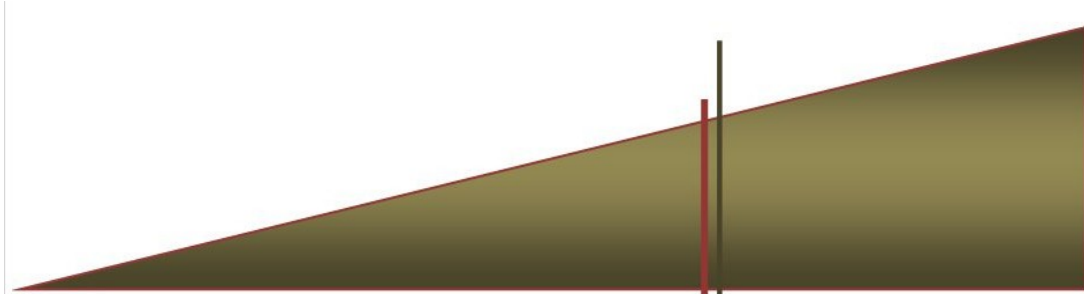
**AGREEMENT:**

- I understand the contract and take responsibility for prompt payment of fees. I have read and understood the fees charged for services, the payment schedule and the cancellation policy.
- I authorize this signed contract to be valid approval for future services allowing Four Legs Good Canine Services to accept telephone or email reservations for service and enter premises without any additional signed contracts or written authorization.
- Four Legs Good Canine Services is authorized to perform care and services as outlined on this contract.
- Four Legs Good Canine Services is also authorized to seek emergency veterinary care with release from all liabilities related to transportation, treatment, and expense. Should specified veterinarian be unavailable, Four Legs Good is authorized to engage the services of the veterinarian of their choice. If client cannot be contacted in a timely manner, Four Legs Good is authorized to approve medical and/or emergency treatment (excluding euthanasia) as recommended by a veterinarian. Client agrees to reimburse Four Legs Good for treatment expenses incurred, as well as expenses incurred for any other supplies needed.
- In the event of inclement weather or natural disaster, Four Legs Good Canine Services is entrusted to use best judgement in caring for dog(s) and home, without liability for consequences related to such decisions.
- I understand this contract is for walking only and does not include any specialized training, although dogs will be encouraged to learn the human and canine codes of appropriate behaviour.
- I give permission for any employee or associate of Four Legs Canine Services to provide service in case my usual walker is indisposed or not available. Four Legs Good Canine Services undertakes to introduce any substitute walker to the dog(s) and thoroughly review all information about the dog and the client's preferences.
- I understand that Four Legs Good Canine Services is bonded and fully insured to cover pets in our care, clients' property and clients' home security.
- I understand that Four Legs Good Canine Services has the right to terminate this contract at any time.

I have reviewed this service contract for accuracy and understand the contents of this form.

Client Signature \_\_\_\_\_

Date: \_\_\_\_\_



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Insured and Bonded

Canine First Aid Certified

## EMERGENCY CARE AUTHORIZATION FORM

### To the Veterinarian:

A representative of **Four Legs Good Canine Services** is caring for my pet(s) as part of pet-sitting and/or dog-walking services and has my permission to transport them to your office if medical attention is needed. I will assume full responsibility for payment of all veterinary services rendered. **Please file this form with my records.**

**Pet Owner** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number {s}** \_\_\_\_\_

**Pet Name{s}** \_\_\_\_\_

**Animal Care Clinic** \_\_\_\_\_

**Veterinarian's Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

I, \_\_\_\_\_ (Pet Owner), hereby give **Four Legs Good Canine Services** my express permission to transport any of my pets for care to the above-noted veterinarian. In the event that my pet needs medical care outside of my veterinarian's office hours, or if it is otherwise not reasonably possible to use my veterinarian, I authorize **Four Legs Good Canine Services** to transport my pet to the nearest emergency animal clinic. I also acknowledge that my dog will be on walks with other dogs and there is the possibility of injury. I assume all responsibility for whatever injury my dog may cause or receive during walks or transport.

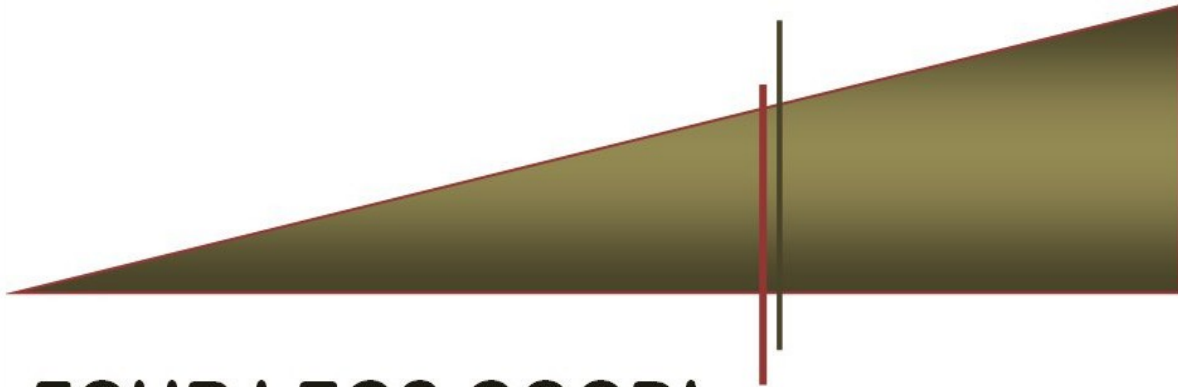
I give permission for the hospital/clinic/veterinarian to administer whatever care/medication necessary to care for my pet(s), with the exclusion of euthanasia and the following:

\_\_\_\_\_


**Expense Limit** \_\_\_\_\_

**Pet Owner's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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## 90-Minute Large-Group Off-Leash Trail Hikes

### **Monday to Friday**

Early morning off-leash hikes, up to 5 dogs, 1 ½ hours total park time!  
Pick up and drop off from home, office, groomers, daycare, etc.

Sorry – this hike cannot accommodate aggressive dogs or dogs with serious behavioural issues.  
Discount for second or more dogs from same home

## Private On-Leash Neighborhood Walks

### **Monday to Friday**

Mid-day neighborhood walks, 1 or 2 dogs from the same home  
30-minute on-leash walks around the neighborhood  
Price includes second dog (from same home)

## One Great Price for All Walks!

\$28.00 per walk (3 or more days/week)	2 <sup>nd</sup> dog (same home) \$26.00
\$30.00 per walk (1-2 days/week)	2 <sup>nd</sup> dog (same home) \$28.00
Occasional drop-ins \$32.00 per walk	2 <sup>nd</sup> dog (same home) \$28.00

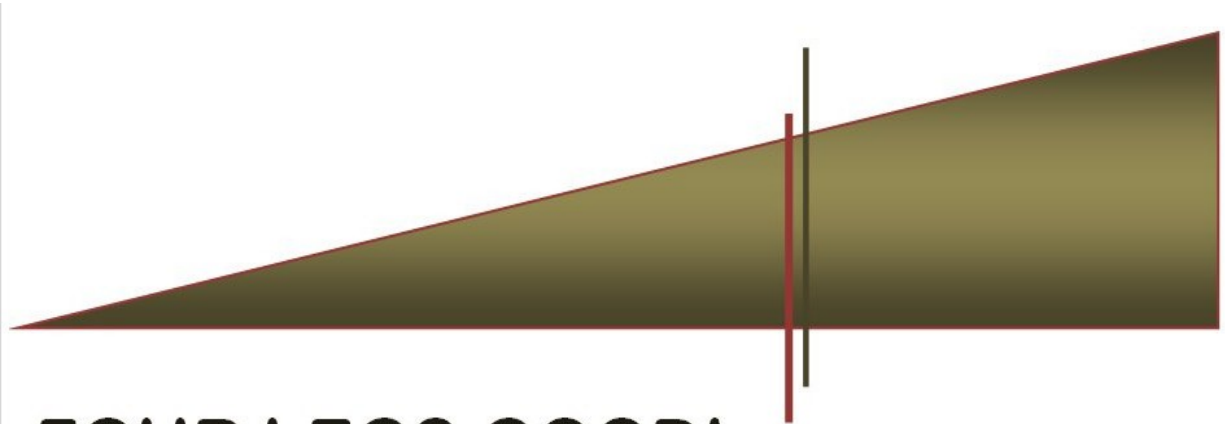
Private 30-minute walks – fee includes 2nd dog (same home)  
5% GST WILL BE ADDED TO ALL INVOICES

**\*\*24 Hours Cancellation Notice Required or full charges apply\*\***

During the Christmas period all dog walks will be cancelled

Dates: Dec 17, 2016 at 4 pm to Jan 2, 2017

**No walks on statutory holidays except by arrangement (double rates applied)**



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## Dog Boarding

Leave your dog and keep your peace of mind.  
Dogs given love and attention in family home atmosphere with their human friend

Dogs go for one hour daily off-leash walk with the group they know,  
or with our own dogs Joseph and Ursula

Location is next to Princess Park, an off-leash dog park

## Rates

Up to 7 days – first dog \$57/day, second or more \$50/day  
8 – 14 days – first dog \$55/day, second or more \$48/day  
15 days or more – first dog \$53/day, second or more \$50/day

5% GST WILL BE ADDED TO ALL INVOICES

Boarding is provided for regular walking clients only (with at least one walk per week booked as an ongoing arrangement)

Pick up and drop off during regular walking hours only

All medications and food must be provided by the client with clear instructions for giving medicine and feeding schedule.

## TAXI SERVICE

Transport to and from veterinary clinics, groomers, anywhere to anywhere

North Shore \$15 flat fee per trip (one way)

Over the bridges to Vancouver \$30 flat fee per trip (one way)

5% GST WILL BE ADDED TO ALL INVOICES