



# Jasper Pet Outpost Service Agreement

Client's Name \_\_\_\_\_ City \_\_\_\_\_  
 Street Address: \_\_\_\_\_ State/Prov \_\_\_\_\_  
 Postal Code: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

### Emergency Contacts

They should be able to make a decision about the care of your pets or home if we cannot reach you in case of an emergency.

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_  
 Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

### Dog/Cat Profile

Does your dog/cat have up-to-date vaccinations? yes / no  
 Name \_\_\_\_\_ Breed \_\_\_\_\_ Age/DOB \_\_\_\_\_  
 Male / Female Spayed / Neutered: yes /no Microchipped: yes /no  
 Color(s) / Distinguishing features \_\_\_\_\_  
 Favorite toys/games \_\_\_\_\_  
 Food allergies/restricted foods \_\_\_\_\_  
 Major medical conditions \_\_\_\_\_  
 Medications (name, dosage, frequency) \_\_\_\_\_  
 Does he/she come when he/she is called? yes /no  
 Has your dog/cat ever shown signs of aggression towards a person or other animals yes /no  
 Explain \_\_\_\_\_

Excessive leash pulling yes /no  
 Attempts to dart through an opening door yes /no  
 Any behavioral concerns or issues (resource guarding behaviors, storm phobias, noise phobias, separation anxiety, sibling rivalry)  
 \_\_\_\_\_  
 Any restricted exercise by veterinarian \_\_\_\_\_  
 Any limited or impaired sensory functions (deaf/blind) \_\_\_\_\_

### Veterinary Information

If your pet becomes injured or ill, Jasper Pet Outpost is hereby authorized to take your pet to Jasper Veterinary and such expense shall be paid by the owner of the pet.

Name of your hospital \_\_\_\_\_

**The Pet Owner will provide all required leashes, harnesses, muzzles, jackets collars, cages, food, (or any other items deemed required for the pets service).**

The Pet Owner agrees to the following terms and conditions:

- The Pet Owner agrees to provide Jasper Pet Outpost with all necessary instructions for their pets requirements while under their care.
- The Pet Owner will provide any medication or special needs instructions for each of the pets.
- The Pet Owner will be considered liable for any damages or injuries caused by the pets while under the care of Jasper Pet Outpost.
- The Pet Owner will pay Jasper Pet Outpost at the applicable service indicated on the current fee schedule. (rates subject to change)

**Jasper Pet Outpost agrees to the following terms and conditions:**

- Jasper Pet Outpost will perform the duties listed by the Pet Owner to the best of {his/her} abilities, in a reliable and caring manner.
- Jasper Pet Outpost will not be liable for any incident that occurs during transportation of the dogs to a vet, kennel or clinic.

How did you hear about Jasper Pet Outpost? - friend - flyer/card - vet - pet store - groomer - internet - other

Signature of Owner/Guardian: \_\_\_\_\_ DATE \_\_\_\_\_  
 Jasper Pet Outpost: \_\_\_\_\_ DATE \_\_\_\_\_