

My Chi's Pet Sitting – Waiver/Emergency Contact/ Medical Information/ for a Pet

| | | | |
|-----------------------------------|-----------------------------------|---------------------|---------------------|
| _____ Pet's Name | _____ Date of Birth | M | F |
| _____ Parent's/Guardian's Name | _____ Parent's/Guardian's Name | Sex | |
| _____ Home Phone | _____ Work Phone | _____ Home Phone | _____ Work Phone |
| _____ Address | _____ Address | | |
| _____ City, ST ZIP Code | _____ City, ST ZIP Code | | |

Alternative Emergency Contacts

| | |
|------------------------------------|--------------------------------------|
| _____ Primary Emergency Contact | _____ Secondary Emergency Contact |
| _____ Home Phone | _____ Home Phone |
| _____ Work Phone | _____ Work Phone |
| _____ Address | _____ Address |
| _____ City, ST ZIP Code | _____ City, ST ZIP Code |

Medical Information

Hospital/Clinic Preference

| | |
|----------------------------|------------------------|
| _____ Physician's Name | _____ Phone Number |
| _____ Insurance Company | _____ Policy Number |

Allergies/Special Health Considerations

I authorize My Chi's Pet Sitting the right to inform The Primary or Emergency Contact(s) provided in this form/waiver of any conditions or treatment required for the pet(s) under their care, in case of an emergency. This waiver allows My Chi's to assume temporary responsibility to take action to provide care/ treatment of the pet(s) while under My Chi's care. This contract is specifically to inform the pet owner or emergency point of contact – and to take the steps needed to provide any care needed to the pet(s) under our care.

| | |
|--|---------------|
| _____ Parent's/Guardian's Signature | _____ Date |
| I give My Chi's Pet Sitting permission to care for my pet(s) in case of an emergency, and to take the steps needed to get care and treatment to my pet(s). As long as all safety measures are taken, for the best interest of my pet(s). | |
| _____ Parent's/Guardian's Signature | _____ Date |
| _____ My Chi's Pet Sitting Owner's Signature | _____ Date |