

**Dayna Troiano**  
**Pet Service LLC Contract**

**Owner Information**

Name\_\_\_\_\_ Email\_\_\_\_\_

Address\_\_\_\_\_ City\_\_\_\_\_ Zip\_\_\_\_\_

Cell Phone\_\_\_\_\_ Work\_\_\_\_\_ Other\_\_\_\_\_

*Emergency Contact*

Name\_\_\_\_\_ Number\_\_\_\_\_

How did you hear about us?\_\_\_\_\_

**Pet Information**

Pet Name	Age	M/F	Breed	Color
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

UTD Vaccinations Y/N      Sick in last 30 days Y/N

Microchip Y/N      Number\_\_\_\_\_

Medical conditions\_\_\_\_\_

Bite history/Aggression (Food, leash, other dogs)\_\_\_\_\_

Medication Y/N (If yes please list names and dosage)

---

---

Any area on walk to be avoided? \_\_\_\_\_

Allowed on the furniture Y/N      Crated Y/N

### **Feeding Instructions**

Brand	Amount	Times
-------	--------	-------

---

Special feeding instructions

---

### **Services and Rates (Non Negotiable)**

**\* Service area within 7 miles. Outside area additional cost \$5**

30 Minute Visit/Walk \$30    \*Medication \$5 extra per pet

- **Holiday fee, \$10 extra per visit  
( Easter Sunday, Memorial Day,  
July 4<sup>th</sup>, Labor day, Thanksgiving, Christmas Eve,  
Christmas Day, New Years Eve, New Years Day)**

## **Inclement Weather Policy**

**Heat Warning:** During heat warnings or high temperature days exceeding 90 degrees, DTPS may shorten walks and spend remaining time indoors with your dog.

**Rain/Thunderstorms:** DTPS may shorten walks due to intensity of rain/storm. \* Please provide towels to dry your dog off.

**Lightning:** For your dog staff's safety we do not walk in lightning storms, quick let outs to potty only and will spend remaining time indoors with your dog.

**Snow and Ice:** DTPS may shorten walks and spend remaining time indoors with your dog. Client is responsible for making sure all walkways and entryways are safe and accessible for our staff including snow removal and salt placement.

## **Cancellation Policy**

**Please notify DTSPS as soon as possible if there is a need to cancel. Eligible cancellations will be issued in the form of a credit equal to the full amount of canceled service. This credit expires one (1) year after the credit is issued.**

### **Dog Walks/Drop- in Visits**

- **NO REFUNDS ON SAME DAY CANCELLATIONS.**
- **48 hr full refund/credit for cancellations.**

### **Pet Sitting**

- **Cancellations must be made no less than 5 days to be eligible for a refund/credit. Eligible cancellations will be issued in the form of a credit equal to the full amount of canceled service. This credit expires one (1) year after the credit is issued.**

## **Veterinary Information**

Name \_\_\_\_\_ Preferred Dr. \_\_\_\_\_  
Address \_\_\_\_\_ Number \_\_\_\_\_

- **If you are going to be away, please make sure to contact your Veterinary office and have my name on file in case of emergency.**

## **Terms Of Payment**

\*Accepted Cash, Checks and **Google Pay**  
**(dtpetservices@gmail.com)**

\*Checks made payable to **Dayna Troiano. Returned checks will be charged a fee of \$12.**

\***Please note Payment for walks and let outs are Due at time of visit unless otherwise discussed.**

Thank you for choosing me for your pet care needs!

I have read and agreed to the above.

Print\_\_\_\_\_

Sign\_\_\_\_\_Date\_\_\_\_\_