

Dog Walking Contract & Profile

Please PRINT clearly in blue or black ink

Section 1: Contact Information

Dog's Name(s) Address			
Primary Owner's Name		Secondary Owner's Nar	ne
Cell Phone		Cell Phone	
Email		Email	
Emergency Contacts			
Please circle yes or no if they have a	a copy of your ho	use key. They should be abl	e to decide about the
care of your pets or home if we cann	not reach you in c	ase of an emergency.	
Name	Relation	Phone	Key Y/N
Name	Relation	Phone	Key Y/N
Should we be expecting anyone at y		our home during your absen	ce? Y /N
If yes, who?			
Veterinary Information			
Name of hospital			
Preferred Doctor			
Address			
Phone			
Section 2: Dog Profile			
Name		Male / Female	
City License Number		Spayed / Neutered: Y / N	٧
Breed		Micro chipped: Y / N	
Age/DOB		Color(s)	
Favorite toys/games		· ,	
Food allergies/restricted foods			
Major medical conditions (past or pre	esent)		
Medications (name, dosage, frequen	ncy)		
Has your dog ever shown signs of ag	agression toward	s a person or other animals/	dogs (hackles, growls,
lunges, air snaps, contact bites)	33		
lunges, air snaps, contact bites)*if your pet is reactive or aggressive towards of	other dogs or unfamil	iar people then a behavior evaluation	on/assessment might be
necessary before a contract or service is hone	ored		
Any restricted exercises by veterinar	ian?		
Any behavioral concerns or issues (r		g behaviors, storm phobias,	noise phobias,
separation anxiety, sibling rivalry, etc	c.)		
			l
Please tell us where you will keep	the following its	ems and any annlicable in	structions:
Land	the following it		5.1. 40ti0115.
Collar/Harness			
Crate			
Treats			



Section 3: Contracted Walks

Type of walk/visit: Potty Break (15 min) 1/2 Hour Walk (30 min) 1 Hour Walk (60 min) Vacation Visits Periodic Walks on Request
Time of walk/visit (1 to 2-hour window requested)AM/PM Please note: Belltown Dog Walker may be on site 10 minutes before and after each walk to allow for leashing time and walk report writing. If you would like to change your walk time/type, please contact Belltown Dog Walker in writing.
Section 4: Policies and Requirements
 Dog requirements must be fully vaccinated and current – proof may be required from your veterinarian be licensed with the City of Seattle – Recommended. must have a safe and strong leash must have a flat collar with identification tags (name, license, contact numbers) must be friendly with unfamiliar peopleINT
House Keys One copy of your house key and building key is required. If you do not have a copy ready for us at the pre-service appointment, we can make a copy for you for \$10 per key.
Off-leash

For liability reasons, your dog will never be let off leash for any reason, except for a medical emergency.

Cancellation Policy

A minimum of 24 hours cancellation notice is required. Cancellations with less than 24-hour notice may be charged at the full rate. If client wishes a total cancellation of all walking dates and services with Belltown Dog Walker, please make these wishes known in writing. ____INT

Inclement Weather Policy

In the best interest of both your dog and Belltown Dog Walker, walks longer than 15 minutes will not occur if the temperature is below 25F or above 95F or high winds or heavy rain prevent normal walking conditions. In the event of inclement weather, the dog will be given a potty break and the rest of the time will be spent playing indoors.

____INT

Dog walker policy

For consideration of services offered, the client agrees not to engage any of Belltown Dog Walkers Outside of the contracted services agreed upon with the company.

INT



Section 5: Terms and Conditions

- 1) Payment is required weekly and must include any additional fees or charges. Credit card payments are accepted at this time. Client understands this contract and takes responsibility for prompt payment of fees.
- 2) Client authorizes this signed contract to be valid approval for future services of any purpose provided by this contract permitting Belltown Dog Walker to accept telephone or email reservations for service and enter premises without any additional signed contracts or written authorization. The term of this contract shall be until either party communicates termination of contract in writing.
- 3) Belltown Dog Walker is authorized to walk the dog(s) as outlined in this contract.
- 4) Belltown Dog Walker is authorized to seek any medical care if deemed necessary with release from all liability related to transportation, treatment and expenses, and is authorized to approve medical and/or emergency treatment (excluding euthanasia) as recommended by a veterinarian. Client agrees to reimburse Belltown Dog Walker for any expenses incurred attending to this need.
- 5) In the event of personal emergencies or illnesses, Belltown Dog Walker will notify client as promptly as possible and fees for missed walks will be reimbursed.
- 6) The client is responsible for any costs/payments due to bites. If a bite occurs, Belltown Dog Walker is responsible for reporting it to authorities. ___INT
- 7) Belltown Dog Walker reserves the right to terminate this contract at any time before or during this term.
- 8) Client understands that this contract is for walking only and will not include any training. ___INT

Section 6: Release of Liability

I do hereby waive and release Belltown Dog Walker from any and all liabilities of any nature for the
actions of myself, my pet(s), or any other person who accompanies me, or holds a key to myhome;
except those arising from negligence or willful misconduct on the part of Belltown Dog Walker. This
includes third party incidents <mark>INT</mark>

Client agrees to notify Belltown Dog Walker of any concerns within 24 hours.

In case of an emergency, inclement weather or a natural disaster I authorize Belltown Dog Walker to use their reasonable judgment for the care and wellbeing of my pet(s) and/or house.___INT

I understand that Belltown Dog Walker can terminate this contract if my pet becomes a threat to the safety or health of Belltown Dog Walker or the community due to aggressive behavior.

I acknowledge I am responsible for medical expenses and damages resulting from an injury to Belltown Dog Walker or other person or animal caused by my pet(s). ___INT

Belltown Dog Walker reserves the right to refuse service to any client, at any time, for any reason.

I attest that all the above information is true to the best of my knowledge. If anything changes from what is listed, I will inform Belltown Dog Walker before the next service is scheduled.

This signed document gives Belltown Dog Walker authorization to enter the above listed address as needed to perform the necessary service. LINT

Sign Name	Print Name	Date