



Wizard of Paws LLC trading as

Peace of Mind Pet Services

10908 Courthouse Road #102256

Fredericksburg, VA 22408

(540) 623-6929

Client Profile

Name _____

Address _____

City _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Emergency Contact Name	Phone	Relationship	Have Key?
_____	_____	_____	_____

Name of Vet Hospital _____ Phone _____

Leaving Key(s) to Which Door(s) _____

Do you have a security system: Y N (if yes, please advise Security Company you are using our service!)

Instructions on how to disarm & arm the security system _____

Are there cameras in your home? Y N (if yes, please describe location): _____

Will others have access to your home (maids, landscapers, family members, etc)? If so, please explain:

Explanation of services & rates:

Service	Rate
Initial Consultation	FREE
Consultation Fee	18.00
Doggie Visit	\$18 for a 30 minute visit
Puppy Care Program	\$30 per day
Puppy Visit	\$15 for a 20 minute visit
Vacation Dog Sitting – 3 – 30 minute visits	\$51 per day
Dog Same Day Emergency Visit	\$18 for a 20 minute visit
Crazy Cat Sitting/The PACKage	\$25.50 for a 45 minute visit for multiple pets
Kitten Visit (1-2 cats) – 20 minute visit	\$15 per visit
Cat Visit (3-5 cats) – 30 minute visit	\$18 per visit
Mixed Pet Sitting (Cat AND dog)	Varies based on needs
Additional 10 minutes	\$5
Holiday Fee	\$18 additional per day
Key Fee	\$18
Returned Check Fee	\$35 per occurrence
Late Fee	See Service Agreement
Veterinary Special Service Fee	\$50 per trip to hospital

Doggie Visit – Standard 30 minute visit. Each “additional pet” charges are a per day rate. Additional blocks of time can be purchased separately, in 10-minute increments.

Puppy Care Program – Standard 20 minute visit conducted twice daily, first visit between 9am – 11am and second visit between 1pm – 3pm.

Dog or Cat Sitting – Visits between 6am-9pm. Additional blocks of time can be purchased separately, in 10-minute increments.



Wizard of Paws LLC trading as

Peace of Mind Pet Services

10908 Courthouse Road #102256

Fredericksburg, VA 22408

(540) 623-6929

Key Fee - Charge to obtain client's keys if not provided during initial consultation; if complications arise due to inadequate keys or access instructions provided, clients may be charged an 'Additional 10 minute fee' for each additional 10 minutes it takes to resolve the issue.

Holiday Fee – An additional surcharge is applied to each visit during these holidays. The entire Holiday Surcharge applicable to your holiday job is required to be pre-paid at time of reservation.

Holiday Periods: New Years Day, Easter Sunday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and New Years Eve.

CLOSED: December 24 to December 26.

Veterinary Special Service Fee- In the event an animal under Peace of Mind Pet Services Care requires unanticipated or emergency veterinary treatment, there will be a fee of \$50 for each visit to the veterinary establishment Peace of Mind Pet Services makes; if Peace of Mind Pet Services is required to stay with pet at the veterinary establishment, client may also be charged at the 'Additional 10-minute fee' for each additional 10 minutes spent at the veterinary facility.

Payment - A 50 % deposit is required for first time clients, long-term assignments, and holiday bookings. Payment in full is required within 7 days of the last day of service. Forms of payment accepted are cash or checks payable to Peace of Mind Services.

Cancellation Policy – Cancellations made within 48 hours of requested date will incur a full penalty of deposit monies. Holiday reservations require a 50% prepayment at booking; holiday cancellations with less than 2 weeks notice will incur a full penalty of deposit monies.

Pet Information:

Pet Name _____ Breed _____

Sex **M** **F** Spayed/Neutered **Y** **N** Weight _____ Color/Markings _____ Birthday _____

How does pet react with strangers? _____

Attitude toward strangers, check all that apply: Excited Friendly Aloof Cautious Stressed Scared Defensive Mean

Has your pet ever bitten a person (if so, please explain) _____

Is pet up to date on Rabies vaccine? **Y** **N** (if not, please explain) _____

How does pet react with strange animals? _____

Pet's fears and hiding places: _____

Location of food _____ Location of treats _____

AM Feeding Instructions _____

PM Feeding Instructions _____

Location of leash/carrier _____ Location of cleaning supplies _____

Where to dispose of trash _____ Location of towels (for muddy paws) _____

Location of litter box _____ Location of medications _____

Medical Conditions/Medications/How to administer medications _____

Other Instructions/special concerns/behavioral notes/unique aspects and abilities of pet:

Please Circle One: YES I have additional pets, see addendum. **NO** addendum needed-s/he is the sole pet of the household.

I have reviewed this Client Profile for accuracy and understand the contents of this form. I understand that Peace of Mind Pet Services may modify the rates listed herein from time-to-time, in its sole discretion, and all up-to-date policies, prices, etc. can be found on their website. I understand it is my duty to inform Peace of Mind Pet Services of any changes in this profile or otherwise relevant in timely manner (at least 48 hours prior to next service); I understand Peace of Mind Pet Services is not responsible for any changes, conditions, or ensuing results if not adequately informed.

Client's Signature _____ Date _____

Peace of Mind Services Signature _____ Date _____



Wizard of Paws LLC trading as

Peace of Mind Pet Services

10908 Courthouse Road #102256

Fredericksburg, VA 22408

(540) 623-6929

Client Profile: Additional Pets Addendum Page: ___ of ___

Pet Name _____ Breed _____

Sex **M** **F** Spayed/Neutered **Y** **N** Weight _____ Color/Markings _____ Birthday _____

How does pet react with strangers? _____

Attitude toward strangers, check all that apply: Excited Friendly Aloof Cautious Stressed Scared Defensive Mean

Has your pet ever bitten a person (if so, please explain) _____

Is pet up to date on Rabies vaccine? **Y** **N** (if not, please explain) _____

How does pet react with strange animals? _____

Pet's fears and hiding places: _____

Location of food _____ Location of treats _____

AM Feeding Instructions _____

PM Feeding Instructions _____

Location of leash/carrier _____ Location of cleaning supplies _____

Where to dispose of trash _____ Location of towels (for muddy paws) _____

Location of litter box _____ Location of medications _____

Medical Conditions/Medications/How to administer medications _____

Other Instructions/special concerns/behavioral notes/unique aspects and abilities of pet:

Pet Name _____ Breed _____

Sex **M** **F** Spayed/Neutered **Y** **N** Weight _____ Color/Markings _____ Birthday _____

How does pet react with strangers? _____

Attitude toward strangers, check all that apply: Excited Friendly Aloof Cautious Stressed Scared Defensive Mean

Has your pet ever bitten a person (if so, please explain) _____

Is pet up to date on Rabies vaccine? **Y** **N** (if not, please explain) _____

How does pet react with strange animals? _____

Pet's fears and hiding places: _____

Location of food _____ Location of treats _____

AM Feeding Instructions _____

PM Feeding Instructions _____

Location of leash/carrier _____ Location of cleaning supplies _____

Where to dispose of trash _____ Location of towels (for muddy paws) _____

Location of litter box _____ Location of medications _____

Medical Conditions/Medications/How to administer medications _____

Other Instructions/special concerns/behavioral notes/unique aspects and abilities of pet:

Client's Signature _____ Date _____