

Featherbed House and Pet Sitting

Client Booking Form

Your details:

Name:

Address:

.....Postcode:

Tel No home: Mobile:

Work: E-mail.....

Your Contact details during the assignment:

Address:

.....Postcode:

Tel:

Emergency contact in UK:

Name:

Address:

Tel No Home: Mobile:

Requirements:

Do you require a Pet sitter: House sitter: Both:

Date Sitter required from..... Time.....

Date Sitter to depart..... Time.....

Do you prefer: A single sitter A couple No preference

Do you require a car owner: Yes No

Is a car available and insured for the sitter to drive? : Yes No

Please specify make / type:

Type of residence:

Town Village City

Is it an isolated area? Yes No

Is there public transport? Yes No

(Please give details).....

House Bungalow Flat Other Specify:

No of Reception rooms.....No of Bedrooms.....

Is there a garden? Large Small

Is there off road parking? Yes No

Other staff employed.....

Will other persons have access to your home during your absence? Yes No

Please specify.....

Local amenities to premises.

Required Duties (Please tick)

Indoor plant care Pet care Alarms

Swimming Pool Garden / outdoor plants other

Please specify.....

Personal / Business messages to be taken and recorded? Yes No

Please specify your requirements:

.....
.....
.....

Pet Details

No. of pets.....: Dogs Cats Other

Dog Breed Ages.....

Cat Breed.....Ages.....

Other Pets / livestock.....

Any illness/ special requirements.....
.....
.....

Vet Name.....Address.....

.....Postcode.....

Tel. No.....

Any other details / information.....
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I have read and understood the terms and conditions of business and agree to abide by them.

I declare the details given are true and correct.

I enclose a Registration fee of which constitutes acceptance of the business terms and conditions.

Signed.....Date.....