



Our Family Pet Sitting Resort & Spa

TRAINING

29W516 Wilson Street West Chicago, IL60185

(630) 407-7679

<https://www.ourfamilypetsittin.com/>

Welcome to Our Family! Follow the simple steps below to become a member of the Our Family Training family.

Step 1 - Fill out this packet and send it to: ourfamilypetsitting@gmail.com. You can email the forms, bring the packet to the resort, fax it to (630) 425-0600, or text photos of each completed page to (630) 407-7679.

Step 2 – Send your pup’s current vaccine record to: ourfamilypetsitting@gmail.com. Must include vaccination expirations dates.

PLEASE NOTE: We do not accept titer testing or vaccination records that are not produced by a licensed veterinarian.

Step 3 – Who can we thank for this referral? Who sent you?

REQUIRED

- Rabies
- Distemper/Parvo
- Negative Fecal
- Bordetella (needed every 6 months)

HIGHLY RECOMMENDED

- Flea & Tick Prevention
- Heartworm Prevention
- K-9 Influenza

Client LAST Name (parent/owner):	Client FIRST Name (parent/owner):
Home Address:	
CELL Phone that will receive pictures & updates from Our Family (one phone # per family)	
CELL Phone (secondary):	Emergency Contact & Number:
EMAIL address (primary):	Primary Vet Name & Number:
Pet 1 Name:	Pet 2 Name:
Pet 1 Breed:	Pet 2 Breed:
Pet 1 Weight:	Pet 2 Weight:
Spayed / Neutered: Yes or No	Spayed / Neutered: Yes or No
IF BIRTHDAY IS UNKNOWN PLEASE PROVIDE BEST GUESS SO WE CAN CELEBRATE!	
Pet 1 Birthday:	Pet 2 Birthday:
Pet 1 Gender:	Pet 2 Gender:
Pet 1 Allergies:	Pet 2 Allergies:
Pet 1 NOTES: (use back side if needed)	Pet 2 NOTES: (use back side if needed)

Signature of client (parent/owner)

Date





Release Form for Media Recording

Our Family Pet Sitting enjoys taking photos and videos of our visits and as a complimentary service we provide families a daily photo via text message regarding their pets' well-being.

I, the undersigned, do hereby consent and agree that Our Family Pet Sitting, its owners, employees, or agents have the right to take photographs, videotape, or digital recordings of my pets, to use these in any and all media, now or hereafter known. I further consent that my pets' first name only may be revealed therein or by descriptive text or commentary.

I do hereby release to Our Family Pet Sitting, its owners, agents, and employees all rights to exhibit this work in print and electronic form publicly or privately to promote business and create client testimonials. I waive any rights, claims, or interest I may have to control the use of my pets' photos in whatever media used. Our Family Pet Sitting agrees that if I provide a request in writing to stop publication of my pet's photos they will respectfully comply.

I understand that there will be no financial or other compensation for recording my pets, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name

Address

Phone

Kelly L. Upman
Witness for the undersigned

Signature

Date

Pets Names:

OUR FAMILY PET SITTING, LLC

29W516 Wilson St, West Chicago, IL 60185

331.871.5100

www.ourfamilypetsittiN.com |

ourfamilypetsitting@gmail.com



ABSENT OWNER CONSENT FORM MEDICAL RELEASE

To be filled out by the owner in case their pet(s) need(s) emergency treatment during their stay.

Owner Name:	
Pet (s) Name (s):	
Phone Number:	
Address:	
Contact Number (s) while you are away:	
Special information we need to know about your pet:	

Please check one of the following statements:

☐ The agent above is responsible for my pet(s) while I am away and will be able to make all decisions regarding veterinary care. They will make every effort to contact me regarding veterinary care.

☐ The agent above is responsible for my pet(s) while I am away. For decisions regarding veterinary care, I wish to be contacted. If I cannot be reached, I appoint the following person to act on my behalf:

Owner (client) Signature:

Date

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WAIVER, HOLD HARMLESS, & RELEASE OF INDEMNITY AGREEMENT

Please understand this is precautionary only. Our Family prides itself on the constant attention and supervision given to each client. However, Pets are unpredictable at times. We will contact you immediately if anything should happen to your loved one during his/her time with us and will provide immediate and superb care if needed.

Owner's Name: _____

Pet(s) Name(s): _____

The Agreement between OUR FAMILY PET SITTING, LLC and OWNER is as follows:

OWNER understands there maybe risks involved with their Pet attending a day care facility. OWNER agrees to be solely responsible for all acts and problems attributed to their Pet at any time during the term of this Agreement, including but not limited to any medical bills which may be incurred as a result of the behavior of their Pet. In no case shall OUR FAMILY PET SITTING, LLC be liable for the OWNER'S Pet's acts and behaviors other than for the exercise of gross negligence on the part of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees, in the keeping of their Pet.

OUR FAMILY PET SITTING, LLC will always exercise responsible, usual and ordinary care of all of the Pets in their possession and control. OUR FAMILY PET SITTING, LLC shall not be under any obligation to guard against injuries which it has no reason to expect to occur because of the disposition of an individual Pet.

OUR FAMILY PET SITTING, LLC has agreed to provide superior attention and day care boarding to the OWNER and its Pet. OWNER agrees to disclose any and all tendencies of their Pet to OUR FAMILY PET SITTING, LLC including but not limited to food allergies, tendencies to bite, attack or scratch, any mischievousness, vicious or violent behaviors, or any other condition which might affect their Pet or the Pets of other Owners. OWNER also understands their Pet may be grouped with other dogs in a social environment. OWNER agrees to be solely responsible for all acts of their Pet during the term of this Agreement and, if appropriate, liable for any damages their Pet causes to any other Pet or person including but not limited to medical bills, veterinary bills, or any other liability which may occur. OWNER agrees OUR FAMILY PET SITTING, LLC shall not be liable to OWNER or any other third party which may result from the behavior, actions or damages caused by OWNER'S Pet except for gross negligence on the part of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees in the keeping of the Pet.

OUR FAMILY PET SITTING, LLC shall not be held liable and OWNER shall hold OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees harmless and indemnified thereon for any claims, damages, injuries, cause of action, death, medical bills, veterinarian bills, or other costs and expenses whatsoever OUR FAMILY PET SITTING, LLC or any other third party may incur as a result of the Pet's actions during the time the Pet is on the property of OUR FAMILY PET SITTING, LLC. The parties specifically agree any gross negligence or intentional act of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees is specifically excluded from this Agreement.

Owner (client) Signature: _____

Date _____



Non - Spayed & Neutered dogs

Our family pet sitting, LLC does not turn away non-spayed and non-neutered dogs. Here is our policy.

Spot won't need to ask the owner if that dog is intact, nor will he have to take a peak under to check for any missing parts. His nose, just knows. How? **Intact males have a different smell than other dogs.** Indeed "intact males retain the ability to mate and give off the scent of male, which can be considered a threat to neutered males" explains trainer and behavior consultant Karen Fazio. The hormone testosterone is what gives a dog his "maieness" scent. Interestingly, when dogs reach 10 months, there's a peak in this smell as testosterone levels in the adolescent male dog may be five to seven times greater than the levels of an adult!

This "male" scent may cause neutered dogs to react negatively towards them causing tension and even aggressive displays. When an intact male enters a dog park, you can almost feel tension in the air. There is belief that neutered dogs, on the other hand, seem to smell quite similar to females, yet it would be interesting to know if there's any actual proof of this. How can we know if we can't ask dogs?

Your pups receive 24 hour supervision while visiting Our Family Pet Sitting; however you will need to sign this waiver releasing OUR FAMILY PET SITTING, LLC from ALL liability, and OWNER shall hold OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees harmless and indemnified thereon for any claims, unwanted pregnancies, damages, injuries, cause of action, death, medical bills, veterinarian bills, or other costs and expenses whatsoever OUR F AMILY PET SITTING, LLC or any other third party may incur as a result of the Pet's actions during the time the Pet is on the property of OUR FAMILY PET SITTING, LLC. The parties specifically agree any gross negligence or intentional act of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees is specifically excluded from this Agreement.

Owner's Information and agreement to terms:

Signature

Date

Email

Signature

Date

Email