

On The Go Concierge

Date: _____
Dear _____,

Welcome to **On The Go Concierge LLC**! Your needs are very clear, and I'm delighted that we'll be working together to make sure they're met!

In the meantime, please prepare a few things to make your registration meeting and subsequent visits most effective.

Please fill out the following materials and have them completed in time for your registration meeting with your sitter. Feel free to take your time with it.
Keep copies for yourself*

- Client Service Agreement
- Client Information Form
- Pet Information Form
- Vet Release Form
- Locksmith Release Form
- Pet Guardianship Form

The attached Policies and Procedures are for you to keep.

Should you have any questions or need clarifications, just call me. I'm looking forward to working with you!

Happy Tails,

Kimberly Graham
CEO On The Go Concierge LLC
615-873-0751
Kimberly@onthego4you.net



POLICIES & PROCEDURES

I want you to be familiar with our policies/procedures. **Please read these very carefully so that there are no misunderstandings later.**

FEE: You have selected **Boarding Dogs.** The daily fee is **$100 per 24 hours AND per animal.**

PAYMENT AND DEPOSIT: You may choose to pay by Check, or through PayPal using your credit card. If you pay by check, please mail your payment to the office before your departure. **For first-time traveling clients,** your 100% payment is required prior to beginning service with On The Go Concierge in order to secure your dates and service.

Full Payment is required to secure all holiday reservations.

BUSINESS HOURS
Our regular business hours are ***Monday-Friday from 8 AM to 5 PM***.

RESERVATIONS Your reservation is only confirmed when you have received a final invoice/confirmation via e-mail/text.
Messages left are not considered confirmations.

HOLIDAY FEES We believe strongly that no pet should be left behind, and that no pet-owner should struggle to find responsible and professional care for their pets, especially during the stressful holiday season. **On The Go Concierge** observes all **Federal Holidays** as well as **the two days prior and the two days post Memorial Day, Labor Day, Thanksgiving, Christmas, and New Year's.** Should you require service on any of the above days you will incur a **$25 per visit holiday fee.**

CANCELLATION Except during holiday periods and the summer months, cancellations may be made up to 24 hours in advance of a scheduled visit. After that period, you will be charged for the visit.

During Holiday periods, 100% payment is due to secure your reservation; ***cancellation 14 or more days in advance will receive 50% deposit back; cancellation 7-13 days in advance will receive 25% of their deposit back; and cancellations occurring 6 or fewer days prior to reserved dates will receive 0% of your deposit back***

CONFIDENTIALITY We recognize that your privacy is important to you and your family. We will not, at any time, either directly or indirectly, use any information for our own benefit, disclose, or communicate, in any manner, any information to any third party. I will also not divulge the dates or nature of your travel or relationship with *On The Go Concierge* without your written permission.

FRIENDS AND FAMILY ACCESS We understand that your friends and families may want to check in on your pets while you are gone but **we must know the names of those friends and family, and the dates and times that they are expected**. If we arrive at your home and there is an unexpected person in your home, we will leave the premises and report our findings to the local authorities. Additionally, *On The Go Concierge* is not responsible for any damages

incurred to or in your home or to your pet during any time period that anyone other than *On The Go Concierge* has access to your home.

DELIVERY FEES There will be a ***$30 per hour delivery fee*** if *On The Go Concierge* needs to pick-up supplies for your pet. Please remember to leave adequate (or more!) food, litter, leashes, etc. for your pet's needs.

LAST MINUTE SERVICE Sometimes emergencies happen – our goal is to help you when you need it most, even at the last minute. However, **do not assume that we have received your last-minute request until you have received an invoice/confirmation via e-mail/text.** ***Emergency service is only provided to clients who have a way to allow us to get in the house to pick up animal and food.*** If we need to pick up your key prior to service, we may require a minimum of 72 hours and will charge the key pick-up fee of $10.00.

PROCESSING FEE A one-time ***$15.00 fee will be charged for the processing of all new clients*** at the time of consultation. This fee is non-refundable. This fee will be added onto your invoice.

REFERRAL PARTNERS Many times I've had the opportunity to send a client referrals and I'm thrilled to do it. This happens often and most probably because I get to know a client well and become keenly aware of who their ideal clients are, as well as the results that people get from the services they provide. This means that you may receive a referral from me. On the flip side, my clients regularly send referrals to my business too. In essence, we become referral partners. ***Here's what I propose: if you overhear someone saying they'd like to find a reliable and guilt-free way to care for their pets in their absence send them to www.onthego4you.net or ask them to contact me for a quick chat, to see if I can help with their pet care needs.*** *I will do the same for you when I meet someone who would benefit from working with you!*

Lastly, one of the things I really believe in is in rewarding my clients for sending referrals and because of that, my business is mostly referral-based. I would be happy to provide you with **a $10 referral fee off your next service.**



SERVICE AGREEMENT

Please "sign" and date this form, then either email it to me (this is preferred) or provide it to your sitter during your registration meeting BEFORE our first service visit. We will not start our service until I receive it, hence the email preference. Keep a copy for yourself.

My Address Is: _____

Today's Date: _____

Your Name: _____

Whom May I Thank For Your Referral? _____

Services: *Personalized Pet-Care*

Terms: _____

Rate: *Please review your invoice for your fees.*

Start Date: _____

1. Ground Rules: The term *On The Go Concierge* as used herein refers to the officers, owners, principals, employees, and subcontractors of the company known as *On The Go Concierge* and its authorized representatives.

2. Client agrees to contact *On The Go Concierge* **3** days prior to departure in order to confirm their travel plans, and to verify the service dates.

3. Client agrees to pay *On The Go Concierge* the total fee for the services to be rendered upon signing this agreement.

4. This contract authorizes *On The Go Concierge* to enter the Client's home to provide the services listed herein and, on the invoice, which shall be an addendum to this service contract.

5. Upon Client's request to provide services in the future via phone, email, or in person, Client agrees that this contract shall be renewed or extended in its entirety, without further written authorization. The term of said renewal shall coincide with the service dates as listed on the most recent of an email confirmation or an invoice.

6. *On The Go Concierge* agrees to provide the services stated herein in a reliable and trustworthy manner. In consideration of these services, and as an express condition thereof, the Client expressly waives and relinquishes any and all claims against *On The Go Concierge* unless arising from deliberate negligence on the part of *On The Go Concierge* or their representative(s).

7. If the pet(s) become ill and medical care is needed while under the care of *On The Go Concierge*, Client authorizes *On The Go Concierge* to transport the pet(s) to the Client's veterinarian (or one who is available). Client authorizes *On The Go Concierge* to approve any emergency treatment recommended by said veterinarian when the cost of treatment is within the limits authorized in a Veterinarian Release Form. Client authorizes *On The Go Concierge* to take Client's pet(s) to an **Emergency Clinic For Animals** when the Client's veterinarian is not immediately available. The Client further agrees to promptly reimburse *On The Go Concierge* for any expenses incurred for emergency treatment. The Client releases *On The Go Concierge* from any and all liabilities related to transportation, treatment and expense resulting from emergencies.

8. Client agrees to reimburse *On The Go Concierge* for the purchase of materials necessary for the satisfactory performance of duties; and for any emergency expenses incurred resulting there from.

9. If Client is delayed in returning home, Client agrees to notify *On The Go Concierge* of such delay and agrees to pay *On The Go Concierge* for any additional time required until their return.

10. Client agrees to pay *On The Go Concierge* the regular daily rate if additional, necessary or unnecessary, visits are made due to Client failing to notify *On The Go Concierge* upon their return home.

11. This contract is for the total number of overnights, at the total cost, listed in the invoice and shall be extended or renewed upon Client's request to provide services in the future as outlined in *Article 5* above. No additional fees, except as noted herein, shall be levied.

The Client fully understands the contents of this contract and agrees to pre-pay the total fees for services stated herein, and to pay any additional charges due when the service has been completed. In the event any part of this contract shall be determined to be invalid it shall have no bearing on any other part of this contract.

The above is agreed to by _____ (Client's Signature)

on _____ (Date)



CLIENT PROFILE (BOARDING)

Name:					
Address:					
Home Phone:		**Cell Phone:**			
Work Phone:		**Email:**			
		Do you check when traveling?		Y N	
Spouse/Partner:		**Phone:**			
Emergency Contact Name:		**Emergency Contact Phone:**			
		This is the person called if I have an emergency and cannot get to your pet(s).			
Your Birthday:					
Vet Name:		**Vet Phone:**			
Vet Address:					
Location of Pet Carrier (in cases of emergency evacuation, most human/animal shelters will not care for pets who are not in a crate):					
Security Code (In Event of Pick-Up From Residence):	**Word for accidental alarm cancellation *(in case of power outage):***				
Security Company:					
Please notify your alarm company that On The Go Concierge will be caring for your pets.					
If applicable, please provide a gate card, parking pass or remote for use by your sitter.					



On The Go Concierge

PET PROFILE

GENERAL

Dog's Name:_____ **Primary breed(s):**_____

Birthday date: _____/_____/_____ **Color(s):** _____

Weight: _____

Sex : ☐ *Male* ☐ *Female* **Neutered/Spayed:** ☐

How long has this dog been in your family? _____

FEEDING INSTRUCTIONS

☐ **Morning Amount:** _____ cups

☐ **Afternoon Amount:** _____ cups

☐ **Evening Amount:** _____ cups

Special Instructions:

_____

Is your pet allowed treats? ☐ Yes ☐ No

Does your pet have any food allergies? ☐ Yes ☐ No

VETERINARY RECORDS

Veterinary Clinic: _____

Phone: ___/___/_____

Clinic address:

_____

***Owner must also provide us with veterinary proof of current vaccinations**

Please describe any medical/health issues that we should know about your pet:

_____

_____

__.

BACKGROUND

Describe your pet's level of socialization with other pets:

☐ None or Minimal ☐ Moderate ☐ Extensive

Please explain:

_____.

How would you describe the energy level of your pet? ☐ Low ☐ Medium ☐ High

Which best describes your pet's exercise routine?

☐ Couch Potato ☐ Moderate Exercise ☐ Athletic

Do you use a crate? ☐ Yes ☐ No **Has your pet ever bitten another Person?** ☐ Yes ☐ No

Is there anything else you would like us to know about your pet?

_____

_____

_____

_____



PET PROFILE

Pet's Name:			
Birth Date:		**Species:**	
Gender:		**Altered:**	
Breed:		**ID chip:** Y N	
Physical Description:			
Food:			
(type, how much, special tricks, feeding schedule, storage location)			
Other Food instructions:			
Leave can opener, measuring cups, spoon/fork, meds and paper towels out!			
Medication + Administration Instructions:			
Current on Vaccinations?	Y N	**No? *Please explain*:**	
Attitude toward strangers?	Excited Friendly Aloof Cautious Stressed Scared Mean Defensive Indifferent		
Has this pet ever bitten anyone or acted aggressively toward anyone? Y N			
Yes? *Please explain:*			
Do you have homeowner's insurance that will cover you in an instance where your pet harms another pet or person?	Y N		
How many litter boxes?	**Where at?**		
Please be sure to leave fresh litter and appropriate tools out near the litter boxes during your absence.			
Times per week to completely empty and refresh litter box?			
Dispose of dirty litter how?			
Favorite places to go potty outside?			
Favorite places to hide from people?			
Favorite Treats, where kept, how given?			

Illnesses?	**Physical conditions to watch for?**



Veterinarian Notification

This is to inform you that my pets are in the care of *On The Go Concierge* pet sitting service.

My signature below authorizes you to perform any medical care you deem necessary on my pet(s) if a representative of *On The Go Concierge* pet sitting service brings my pet(s) to you.

I am limiting services to the following monetary amount: _____.

Pet Owner's Signature **Date**



Locksmith Notification

This is to inform you that my pets are in the care of *On The Go Concierge* pet sitting service.

My signature below authorizes you to perform any emergency repair or entry services deemed necessary to access my home at _____, Nashville, TN by a representative of *On The Go Concierge* pet sitting service.

Pet Owner's Signature **Date**



Pet Guardianship

In the unfortunate event that something happens to you, please name who should be contacted to take over the care of your pet(s).

Please be sure the named person(s) is aware that you are appointing them as guardian(s) of your pet(s).

In the event of an emergency, which incapacitates me, I authorize *On The Go Concierge* to turn my pet(s) over to:

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Relationship: _____

_____ _____

Pet Owner **Date**