

Chris Ciaccio  
Professional Pet Sitter, LLC  
[ccpetsitting629@gmail.com](mailto:ccpetsitting629@gmail.com)  
(610) 781-8803

**PET OWNER DETAILS**

Today's Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

Select option:      Key is required \_\_\_\_\_  
                         Garage code: \_\_\_\_\_  
                         Alarm code: \_\_\_\_\_

Will anyone else be entering your home during our visits? \_\_\_\_\_

If so, name and reason: \_\_\_\_\_

**EMERGENCY CONTACT**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_

**VET DETAILS**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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**PET PROFILE (one for each pet)**

Pet's Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Sex: \_\_\_\_\_

Approximate Age/Birthday: \_\_\_\_\_

Color/Markings: \_\_\_\_\_

Neutered:    YES            NO            Up-To-Date on Vaccinations: YES            NO

Feeding schedule:    AM                            MIDDAY                            PM

Are treats allowed:    YES            NO

List any medications, dosage and time of day given: \_\_\_\_\_

Any health concerns or allergy issues (food or environmental): \_\_\_\_\_

Is your pet microchipped:    YES            NO

Pet's temperament:    Shy    Energetic    Reactive    Calm

Leash manners:    Pulls? \_\_\_\_\_    Reactive to other dogs/squirrels? \_\_\_\_\_

House rules:    Allowed on furniture? \_\_\_\_\_    Crate trained? \_\_\_\_\_

Fear triggers: (Thunder, fireworks, separation anxiety, etc.) \_\_\_\_\_

Favorite toys, activities: \_\_\_\_\_

Helpful commands: \_\_\_\_\_

Anything else you would like us to know about your pet: \_\_\_\_\_

May I share your pets photos/videos on the company Instagram page(pawesomepetlove)?  
YES    NO

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**VET RELEASE**

Owner's Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Vet's Name: \_\_\_\_\_

Vet's Address: \_\_\_\_\_

Vet's Phone Number: \_\_\_\_\_

During my absence, Chris Ciaccio, will be caring for my pet(s) \_\_\_\_\_.  
In the event of an emergency, I authorize you \_\_\_\_\_ to administer medical  
treatment and will be responsible for payment to you upon my return.

I, \_\_\_\_\_, give Chris Ciaccio permission to transport my pet(s) to  
the above veterinarian and authorize treatment in the event of an emergency or illness. If this  
veterinarian is not available, I authorize Chris Ciaccio to transport my pet(s) to a veterinarian of  
choice and I authorize treatment. If emergency care is needed after regular office hours, pet(s)  
may be taken to the nearest veterinarian emergency clinic/hospital. I agree that Chris Ciaccio is  
released from all liability related to transportation to and from the veterinarian and treatment for  
sickness or emergency. This release will remain valid for all current and future visits unless a  
new release is signed.

Pet Owner's  
Signature \_\_\_\_\_

Date \_\_\_\_\_

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**VET RELEASE**

Owner's Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Vet's Name: \_\_\_\_\_

Vet's Address: \_\_\_\_\_

Vet's Phone Number: \_\_\_\_\_

During my absence, Jenn Bogar, will be caring for my pet(s) \_\_\_\_\_.  
In the event of an emergency, I authorize you \_\_\_\_\_ to administer medical  
treatment and will be responsible for payment to you upon my return.

I, \_\_\_\_\_, give Jenn Bogar permission to transport my pet(s) to the  
above veterinarian and authorize treatment in the event of an emergency or illness. If this  
veterinarian is not available, I authorize Jenn Bogar to transport my pet(s) to a veterinarian of  
choice and I authorize treatment. If emergency care is needed after regular office hours, pet(s)  
may be taken to the nearest veterinarian emergency clinic/hospital. I agree that Jenn Bogar is  
released from all liability related to transportation to and from the veterinarian and treatment for  
sickness or emergency. This release will remain valid for all current and future visits unless a  
new release is signed.

Pet Owner's  
Signature \_\_\_\_\_

Date \_\_\_\_\_

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## **Company Policies**

### **Payments**

All payments are due at the start of service. We accept cash, check and Venmo.

### **Liability**

We are bonded and insured through Pet Care Business Insurance.

### **Refunds & Credits**

Once services are booked, there are no refunds. If services are not utilized, you will receive a credit for future pet visits.

### **Home Visits**

Midday visits will be scheduled during 11am-2pm. We do not guarantee exact times for any visits. Morning visits will not be scheduled any earlier than 7am, and bedtime visits will not be scheduled any later than 9pm.

### **Holiday Surcharge**

A \$10 additional charge will be added for any visits on holidays.

### **Pet Safety**

For the safety of your pet and the community, all dogs will be kept on a leash during outdoor walks—no exceptions.

### **Secure Entry**

We take the security of your home seriously. Keys/codes are stored securely and never labeled with your address.

### **Aggression & Liability**

Owners must disclose any history of biting or aggression towards humans or other animals.

### **Right to Terminate**

We reserve the right to terminate service immediately if a pet poses a danger to our team.

I have read and agree to the company policies for CC Pet Sitting. I understand that Chris, Jenn and Jae are bonded and insured professionals dedicated to the safety and well-being of my pets and property.

Pet Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

