



Agreement

I (your name) _____, give my consent to Stroll Pawtrol (SP) to be in my home on the agreed dates for pet care. While services are being carried out, the client is aware SP will serve and protect their pet(s) in a professional manner. The client also acknowledges that animals can be very unpredictable and there are risks and unforeseen events that may occur but is entrusting SP with the health and well being of their furry family members in their absence. Should an injury or illness occur to my pet(s) that requires veterinary care during my absence, I authorize SP to act as my agent in procuring veterinary care. I agree to not hold SP liable for injuries or illnesses suffered by my pet(s) or any fees for veterinary services incurred on their behalf. I understand that I am solely responsible for any harm caused by my pet(s) while my pet(s) is/are attending walks, pet sitting or any activities with SP. I certify that I have read and understood this agreement.

Pet(s) name(s): _____

SIGNATURE OF Parent: _____

Date:

PRINT NAME OF Parent: _____

STROLL PAWTROL: *KIMBERLY GLYNN*

Date: