

Mirrani's Pet Sitting and Boarding

ncpetsitter@earthlink.net

https://www.ncpetsitter.com

Vet Introduction to Sitter

I, (pet ow	(pet owner), announce my intentions to be away from home			
for the following dates:	·			
In this time, my pet sitter	will be looking at	will be looking after my pets.		
Please allow them to:				
		Yes	No	
Drop off and pick up for regular or sche	eduled vet visit.			
Drop off and pick up for grooming or na	ail care.			
Drop off and pick up for emergency care	e or boarding.			
Make medical decisions on my behalf. ((See Power of Attorney sheet)			
Refill and/or pick up medications.				
Be made aware of any new medical hist	cory or test results in my absence.			
Charge medical costs to my account, for	r me to pay on my return.			
Pet owner's name (printed)				
Pet owner's signature		Date:		
Veterinarian signature		Date:		
Pet sitter's name (printed)				
Pet sitter's signature		_ Date:		