



## Music City Pet Sitting – Veterinary/Photo Release Agreement

(615) 390-0706

In the event any of my pets or large animals appears to be ill, injured, or at significant risk of experiencing a medical problem at the start of service or while in the care of Music City Pet Sitting, I give permission to Music City Pet Sitting to seek veterinary service from a veterinarian or a veterinary clinic and to share any medical records necessary to provide my pet(s) with the best care. My preferred veterinary services are listed at the bottom of this form. Other veterinarians or emergency care clinics chosen by the pet sitter are acceptable.

I ask Music City Pet Sitting to inform the attending clinic or veterinarian of my requested total diagnosis and treatment limit of **(PLEASE CIRCLE ONE AMOUNT) \$200 \$500 \$1000 UNLIMITED** per pet. I understand that efforts will be made to contact me regarding any treatments, illness, injury, or potential problems as soon as the condition is deemed not life threatening and/or contact is possible. I understand that Music City Pet Sitting care providers work hard to prevent accidents and injuries, and that such problems may occur no matter how well a pet is cared for. I understand that Music City Pet Sitting and its staff assume no responsibility for the actions and decisions of the veterinary staff, the health, or the death of my pet(s).

I will assume full responsibility for the payment and/or reimbursement for all veterinary services rendered (including but not limited to diagnosis, treatment, grooming, medical supplies, and boarding) as well as any Special Service fees of Music City Pet Sitting. Such payments will be made within 14 days of the initial incident.

Every canine (dog), feline (cat), equine (horse), and/or avian (bird) at the site of service will be current on its vaccinations, heartworm, & flea/tick prevention prior to the arrival of any caregiver and will remain current on such vaccinations and treatments throughout each service visit period to ensure the health of my pet. I will not hold Music City Pet Sitting or its employees responsible should my pet become ill due to non-current vaccinations or parasite preventatives.

I agree to notify Music City Pet Sitting of any signs of injury or possible illness before any visit as soon as the condition appears. Music City Pet Sitting reserves the right to cancel service at any location where a pet with a potentially infectious condition exists.

Any photos taken to update clients on status of pet(s) remain the property of Music City Pet Sitting and may be used in social media forums (i.e. Facebook, Instagram, etc) and for advertising purposes.

This agreement is valid beginning on the date below and has no expiration date.

Client/Owner Name: \_\_\_\_\_

Client Signature: \_\_\_\_\_ Date \_\_\_\_\_

Current Veterinarian/Animal Hospital: \_\_\_\_\_