

## 2022 PET SITTING AGREEMENT

In our effort to assist you, please fill out this agreement and email it back to our Guest Relations Team. Once we receive the completed form, we will begin filling your request for a pet sitter. We ask for at least 24 hours notice in advance to fulfill all pet sitting requests. Email: GuestRelations@OceanHouseRI.com or GuestRelations@Weekapauginn.com depending on your stay.

## PET SITTER FEES, PAYMENT OPTIONS & CANCELLATION POLICY

PET SITTER FEES	Pet sitting may be arranged for a charge of \$25.00 per hour for one pet or \$35.00 per hour for two. Pet sitters have a four-hour minimum per appointment and are considered "independent contractors" of the hotel.  The hotel has completed a criminal background check on our pet sitters.				
CANCELLATION POLICY	We kindly ask for at least 2 applied to your guestroom		ncellations; otherwise a full charge will be		
GUEST INFORMATION					
			Hotel Confirmation Number:		
I can be reached on my cel					
,	1				
In case the hotel staff or the	e pet sitter is unable to cont	act you at the telephone	e number listed above, please contact:		
full name	relationship		area code & cell phone number		
DECLIECTED DATE(C) E	OD DET CITTEDC.		-		
REQUESTED DATE(S) F First request	OR PET 511 TERS:				
	er		_, 2022		
	a.m.				
-	tel at approximately	-			
	for pet sitters, please cont		p.m.		
For muttiple requests/unys	s for pei sitters, pieuse conti	mue below			
Second request			2022		
	er		_, 2022		
Request start time:	<del>-</del>				
•	tel at approximately	: a.m.	p. <sub>m.</sub>		
Third request			2022		
Requested date for pet sitt	er		_, 2022		
Request start time:	a.m. p.m.				
_	tel at approximately	: a.m.	p. <sub>m.</sub>		
Fourth request			- m.		
<del>-</del>	er		_, 2022		
Request start time:		p.m.			
I expect to return to the ho	tel at approximately	: a.m.	p.m.		

ME	AL OPTION FOR PET S Yes No The pet sitter may order a extend over 6 (six) hours o	meal for himself/he			or service that	
	The cost of the meal will n (plus all taxes/delivery charges a			l to your guest r	oom account.)	
AC	ΓΙVITIES May the pet sitter take the May the pet sitter take the	-	t room?	Yes Yes	No No	
	Are there any activities/pla	aces that the pet sitt	ter shold not ta	ake the pet?	Yes	No 
BAG	CKGROUND INFORM	ATION & SPEC	IFIC INSTR	UCTIONS		
	Name (s) of Pet	Age	Gender Boy	Girl	Breed	
	Is the animal in good heal	th? If not, please ex	xplain:			
	Does the animal have any other special needs that m			sical or emot	ional characterist	ics, or
	Does the animal require as provide detailed instruction	•	MUST be adm	inistered by t	he pet sitter? If so	), please
	Do you require the pet sit	ter to feed the anim	al?			
	Do you have any further i	nstructions regardi	ng the care of	your pet?		

## **AUTHORIZATION, RELEASE & INDEMNITY**

I hereby authorize the hotel to take such steps as it may to reasonably determine to be necessary for the welfare of the pet should the pet become sick, have an accident or require medical attention for any reason while the pet is in the care of the hotel's pet sitter, including without limitation contacting a local veterinarian and/or taking the pet to a local medical facility.

I hereby release and agree to indemnify the Ocean House (the "Hotel") its manager's, owners, agents, assigns, officers, directors, and servants from any liability claims that the pet or myself or any other person may have against the hotel or its management as a result of any injury, loss-including death or damage that the pet may suffer or incur while being pet sat in accordance with this agreement; or as a result of any reasonable decision taken under the authorization granted herein.

I agree that I am liable for any injury caused by my pet, inflicted onto a guest, employee or any other person or animal while on property.

I have read this pet sitting agreement in its ent	tirety and acknowledge t	hat I fully understand its terms.
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Parent or Guardian Signature	Date