



The Scruffy Puppy | Hazlet, NJ | 732-520-0454
scruffypuppypetcare.com

Pet Service Request Form - Dogs

PET NAME: _____ **OWNER:** _____

CELL PHONE/EMAIL ADDRESS: _____

HOME ADDRESS: _____

Start Date for current service: ____/____/_____

End Date for current service: ____/____/_____

Days Service Needed (please circle all applicable): Sun Mon Tues Wed Thurs Fri Sat

Services Requested:

- | | |
|---|--|
| <input type="checkbox"/> Potty Break | <input type="checkbox"/> Yard Clean Up |
| <input type="checkbox"/> 20 min Walk/Play Combo | <input type="checkbox"/> Water Plants |
| <input type="checkbox"/> 20 min Jog | <input type="checkbox"/> Retrieve Mail |
| <input type="checkbox"/> 30 min Walk/Play Combo | <input type="checkbox"/> 1 Additional dog |
| <input type="checkbox"/> 45 min Walk/Play Combo | <input type="checkbox"/> 2 Additional Dogs |
| <input type="checkbox"/> Feeding | <input type="checkbox"/> Medication Administration |

Feeding Instructions:

Name & Type of food: _____
 Amount: _____
 Measure with: _____
 Uneaten food (circle one): Dispose of | Leave out

Medication Instructions:

Name & Type of medication: _____
 Amount: _____
 Measure with: _____
 How to administer: _____

Additional Comments: _____

This request is an addendum to the contract already in place. All pricing has been agreed upon as per website listing. By submitting this request, I agree to all terms as stated on The Scruffy Puppy website (scruffypuppypetcare.com) and within the Pet Care Contract & Home Profile.

X _____ X _____ _____/_____/_____
 Signed Name Printed Name Date