



KMV and Friends Pet Sitting

Your pet's other best friend

Deceased Pet Agreement

In the unfortunate event that your pet passes while in our care, please select what you'd like done with their remains. *For multi-pet households, please fill one form out for each pet.*

Name of Pet: _____

Initial your option

_____ Home Burial- specify storage location _____

_____ Cremation (keep remains)

_____ Vet disposal *only an option for pets who pass at the clinic

Pet Owner Signature

Date

Pet Owner Signature

Date