



Authorization for Admission to Condo/Apartment or Office

I give my permission to Cindy Cardinal of 2 Poops & a Scoop, Inc. to enter my residence or office to provide quality pet care for my pet(s):

Pet's Name(s): _____.

Please allow this organization to perform this service and give them all necessary assistance regarding this matter.

CUSTOMER INFORMATION AND SIGNATURE

Signature _____ Date: _____

Name: _____

Address: _____ City/State/Zip Code: _____

Home Phone: _____ Cell Phone: _____

EMERGENCY CONTACT INFORMATION (FAMILY OR FRIEND)

Name: _____ Relationship: _____

Home phone: _____ Cell phone: _____