Indy Area Pet Sitters Network Membership Application

□ New Application □ Renewal	Month/Year
Applicant's Name	
Business Name	_
Business Address	
Business Phone Cell Phone _	
Email	
Business Website	
Service Area (include Zip Codes)	
Liability Insurance Company	
Bonding Company (if applicable)	_
Number of Employees/Independent Contractors	s
Company Start Date	
Memberships/Certificates	
Approximate Number of annual visits	Approximate number of human clients
Membership Requirements	
I agree to the following requirements (please in	nitial each one):
I have read and agree to abide by the IAP of this form.	SN Mission Statement & Code of Ethics found at the end
After attending a meeting, submit a comp	oleted application.
Payment of annual membership fee of \$24 year.	4 (pro-rated after January) and due in January of each
I am providing proof of business liability in of IAPSN (attach copy to this application)	nsurance and I will keep insurance active while a membe \cdot
To be included/maintained on the website calendar year.	e, a member must attend at least three meetings per
	ne IAPSN Yahoo Group Forum and use it to communicate t convenient to have the messages forwarded to your
By submitting this application, I verify all infor agree to waive any liability to IAPSN or its men	mation is correct to the best of my knowledge. I also nbers.
Printed Name	
Signature	
To Be Completed by Receiving Member: Date App	olication Received Amount Collected \$

Indy Area Pet Sitters Network Membership Application

IAPSN MISSION STATEMENT

The mission of IAPSN is to provide local pet sitting professionals with a support network and share educational opportunities or tools. IAPSN strives to educate pet owners about responsible pet ownership and the benefits of pet sitting services. IAPSN supports local shelters and rescue groups in the efforts with caring for and finding responsible homes for pets.

IAPSN MEMBER CODE OF ETHICS

Honesty and Integrity

IAPSN members deal with clients and other pet sitters with honesty and integrity and avoid any conduct that could put clients or their animals, residence, or property at risk. Anyone who is convicted of a crime against persons or property, or listed as a registered sex offender, will have his or her IAPSN membership terminated.

Appropriate Channels for Criticism

Members conduct themselves as professionals, and should not engage in public criticism of fellow pet sitters or of IAPSN. Members are expected and required to treat each other with respect and dignity and use of profanity on the forum is strictly prohibited.

Use of IAPSN Name

The IAPSN name may be displayed only by an IAPSN member in good standing.

Pet Sitting is Our Focus

IAPSN recognizes that many pet sitting businesses are rapidly growing and diversifying, and welcomes members who offer complimentary services such as boarding, grooming or training. However, IAPSN's mission and identity require that membership be limited to those whose primary business is pet sitting.

Sanctions

Failure to comply with this Code of Conduct and Ethics, if substantiated in the opinion of IAPSN, will be grounds for immediate revocation of membership.

What is the next step?

Thank you for joining our network. Please turn this Membership Application in at a meeting along with your Proof of Insurance and Membership Fee. If submitting by mail (after attending a meeting), please mail all three items to: Cathy Clark, 12140 Whitebark Drive, Indianapolis, IN 46236.

You will receive an email from the Forum Administrator that invites you to join the forum. There will be instructions sent with the invitation.

You will receive an email with instructions for submitting your Company Information to be included on our website. New members will be added monthly. Free changes are allowed every January. After your initial submission, you will be charged \$20 for changes (unless made in January).