



ASHEVILLE AREA PROFESSIONAL PET SITTERS ASSOCIATION

New Member Application

Thank you for choosing the Asheville Area Professional Pet Sitters Association. We're glad you're here, and look forward to supporting your professional pet care business.

The Asheville Area Professional Pet Sitters Association is a group of locally owned professional pet sitting and dog walking businesses dedicated to providing outstanding pet care in the greater Asheville area.

Our membership includes pet sitters with decades of experience, numerous members who rescue and foster animals in need, and many with educations in veterinary medicine, animal behavior and training. Our membership depth and experience represents the best pet sitters and pet sitting businesses in WNC.

The AAPPSA Membership term runs January 1 through December 31. Membership fees are not prorated based on when you join during the year. Applications are accepted quarterly, and New members are posted to the AAPPSA Website in the next quarterly update. (Example: New member joins in February. The next website update will occur during the month of April.)

Membership Requirements:

- You are the primary owner of a pet sitting business.
- You've been actively operating in the pet sitting business for at least one year.
- Your professional pet sitting services are centered in the Greater Asheville Area, Buncombe County, and/or the bordering counties (Henderson, Haywood, Madison, Yancy, McDowell).
- You agree to follow our AAPPSA Code of Standards.
- You're committed to upholding all AAPPSA bylaws.
- Provide three references from your pet business clients.
- You've secured personal and property liability insurance for your pet sitting business.
- You use a professional client contract or agreement for the services you provide.
- You can attest to a clear criminal background check.
- You respect and adhere to the NC Dept. of Agriculture/Animal Welfare Administrative Code and laws, and you do not offer in-home animal boarding without the required license or permit. (Proof of Permits and License must be presented with your application.)

- All potential new AAPPSA members must meet and be approved by two or more current members at one of our New Member Meet-Ups.
- \$125 Membership Fee

Please scan and email this application, proof of insurance, and other supporting documents to the Membership Coordinator at AshevilleAreaPetSitters@gmail.com. Once your application is received and approved the Membership Coordinator will contact you for an interview, Dues payment and business listing information for our website directory.

AAPPSA New Member Application

Business Owner/Principal Name: _____ Date: _____

Business Address: _____

City, State, Zip: _____

Business Phone: _____ Email: _____

In business since: _____ Website: _____

Name of Pet Sitting Insurance Group: _____

Policy #: _____ Expiration Date: _____

Business Social Media Handle:

Instagram: _____ Facebook: _____

Other: (TikTok, SnapChat, Etc) _____

Are you a business with Staff/Team/Employees? _____

What is your current service area? (General description and Zip Codes):

Are you a member of any National Pet Sitting Associations?: Please list:

Do you have any additional Pet Care related Certifications or Training? Please list:

Please list three Pet Sitting References: (Ideally three clients who agree to provide a reference.)

Name: _____ Email: _____ Phone: _____

Name:_____ Email:_____ Phone:_____

Name:_____ Email:_____ Phone:_____

AAPPSA Code of Standards:

As a member of the Asheville Area Professional Pet Sitters Association, I pledge to abide by these honorable standards:

- To provide conscientious care for the animals entrusted to me, being constantly attentive to their security and well-being, and to place their welfare above all other business considerations.
- To take every opportunity to learn more about my profession and to improve my services.
- To deal honestly and fairly with the public and to respect the confidentiality of each client.
- To avoid unfair competitive practices, any slander or defamation of my competitors and actions or business practices that would result in dishonor or distrust of my competitors or the pet care industry in general.
- To support AAPPSA, its policies and programs, and to participate as fully as possible in its activities.
- To encourage responsible pet ownership and to promote, especially through the charitable programs of AAPPSA, increased public awareness and acceptance of humane and noble animal treatment.

By signing and submitting this application I attest that:

All business information contained in this application is true and accurate to my knowledge.

I am the principal owner and person responsible for making business decisions for the company listed in the application.

All AAPPSA membership criteria will be kept current and remain in good standing in order to remain a member of the Association.

Printed Name:_____ Title:_____

Signature:_____ Date:_____