

Please print, fill out and bring this form with you at the time of your pets' appointment. Thank you.

GROOMING

Name: _____ City: _____ State: _____ Zip: _____
Phone (with area code): _____ Pets' Name: _____
Breed: _____ Color: _____ DOB: _____

Grooming Instructions Please be as specific as possible
*OWNER(S) OR A RESPONSIBLE AGENT MUST BE AVAILABLE BY PHONE BEFORE NOON
TO DISCUSS/CONFIRM GROOMING INSTRUCTIONS*

Would you like your pet to have a midday walk (\$3 per walk)? **YES / NO**

Would you like your pet to be seen by the Doctor today? **YES / NO**

Reason for exam:

ARE DIAGNOSTICS AND TREATMENT OK?

Yes, do tests and treatment as needed.

No, don't do tests or treatment without contacting me first.

I understand that if I am not able to be reached, testing and treatment will not be done.

***** **GERIATRIC / DEBILITATED PETS** *****

Geriatric or otherwise debilitated pets may be at heightened risk to undergo the stresses inherent with today's grooming.

**Please expedite my pet's grooming today if possible, due to age/health related concerns;
I understand that there will be an additional charge for "Geriatric Pick-up" (\$25, pick-up by 4pm)**

***** **NON-GERIATRIC PETS** *****

Early Pick-up is considered to be *by 4PM*****

Non-geriatric pets requesting Early Pick-up must be arranged & confirmed with the groomer directly on the day of grooming, & will be subject to an additional (min.) fee of \$40

**Please expedite my pet's grooming today if possible;
I understand that this request will require confirmation from the groomer,
and that there will be an additional charge for "Early Pick-up" (\$40, pick-up by 4pm)**

PLEASE CALL BEFORE PICKING UP YOUR PET

SIGNATURE: _____

CONTACT NUMBER FOR TODAY: _(_____)_____ (required)