

GROOMING ADMISSION / CONSENT FORM

COBBS FORD PET GROOMING CENTER

Date: _____

Owner's Name: _____

Address: _____ Phone: _____

Pet's Name: _____ Breed: _____

Please take a moment to describe how you would like your pet groomed.

HEAD

Teddy Bear face and head (scissored round)

Ponytail with Bow

Face shaved clean (poodle-like) with top of head scissored

Other (please specify) _____

BODY

No length off-only neaten up

Length to be taken off (please specify in inches amount to be removed) _____

Standard breed cut

LEGS

Same length as body

Longer than body (please specify how much longer) _____

Other (please specify) _____

FEET

Shaved clean of hair (poodle-like)

Scissored to match body and legs

If there is extensive matting (tangling) of hair, does our groomer have permission to shave these matts out? Y N

Special Instructions:

Do we have permission to sedate at an additional charge if needed? YES / NO

What number may we reach you at today? _____

What time will you pick up? _____

Are there any health issues or other procedures your pet needs while at our facility?

NOTE: All dogs left at COBBS FORD PET GROOMING are required to be current on Rabies, DHLPP, Influenza, and Kennel Cough vaccines, and cats must be current on Rabies and CRP vaccines. Standard procedures for grooming dictate that we clean anal glands and ears to help prevent any future problems. All the toe nails will be checked and trimmed if needed all at no charge.

If not current on vaccinations, do we have your permission to update at an additional charge? Y N

Signed _____
Title, First Name, Last Name, or Authorized Agent

Staff Initials _____