



Grooming Contract

Owner(s) Info:

Owner(s) Name _____

Address _____ City _____ State ____ Zip code _____

Best phone number to reach you: (Circle one) home/cell/work _____

Additional Phone number _____ or _____

Email address: _____

Can we email you reminders of upcoming appointments? **YES** **NO**

Emergency contact (someone other than yourself):

Name _____ Phone # _____

How did you hear about us? _____

Pet Info:

Pet's Name _____ Breed _____ DOB/DOA _____

Check all that apply: **Cat** or **Dog** **Male** or **Female** **Neutered** or **Spayed**

Has your pet been groomed before? **YES** **NO** If yes, how often? _____

What type of grooming do you do at home? **Teeth** **Nails** **Brush** **Trim** **Bath**

What type of haircut do you prefer on your pet? _____

Is your pet known to do any of the following while being groomed? **Bit** **Nip** **Growl**

Veterinarian Clinic _____ Vet Contact # _____

Brand of flea preventative _____

List of any known allergies/sensitivities _____

Is your dog on any medications? YES NO

If yes, what kind? _____

Does anyone else have permission to pick up your pet, besides you?

Is there anything else you would like us to know about your pet?

Owner's Signature: _____ Date: _____