

CLIENT APPLICATION

Date:	
Owner Information:	City/State:
	Home Phone:
Name:	Work Phone:
Address:	Cell Phone:
	Email:
Services Interested in: Day Care	
Grooming	
Training	
Photos	
Emergency Contact Information:	
Spouse/Significant Other	Someone Outside Immediate Family
Name:	Name:
Phone:	Phone:
	Relationship:
Veterinarian Information:	
Hospital:	
-	Doctor:
	Phone:
Dog Information:	
Name:	Color:
Primary Breed:	Neutered/Spayed: Yes No
Sex: Male Female	Weight:
Birth Date:	
How long have you had your dog?	
Where did you get your dog?	



Medical History:

Please attach a copy of your most recent veterinarian vaccine records showing proof of Rabies vaccine, DHLPP (distemper) vaccine, Bordello (Canine cough) vaccine, Influenza vaccine and a Fecal exam.

Type/frequency of flea/tick preventative treatment:_____

List any current or past medical problems/treatments or allergies:_____

List other household pets:

Species	Sex	Neutered	Age

Behavior: Has your dog ever. . .

Been to obedience class?	Yes	No
Been socialized to other dogs?	Yes	No
Jumped a fence?	Yes	No
Had to share with other dogs?	Yes	No
Growled at another person?	Yes	No
Growled at another dog?	Yes	No
Bitten a person?	Yes	No
Bitten another dog?	Yes	No

Other Information:

What would you like to achieve for you and your dog by utilizing our services?

Is there anything else you'd like to share with us about your dog?

Groomingdale's



CREDIT CARD AUTHORIZATION

I give my permission for Groomingdale's to pay for my invoice for services due at any given time and grant my express authorization to charge such services to my:

()	Visa/Mastercard#	_Exp
()	Discover#	_Exp
Securit	y Code:	
Which	card is on file with Groomingdale's	
Credit	Card Billing Information	
Name:		
Street Addres	s:	
City/St	cate/Zip:	

I understand that any such purchase of services made with this express authorization may not then be revoked by me for such services supplied by Groomingdale's.

Signature

Date



CLIENT AGREEMENT

<u>Course</u> (select one):

____ Day care

_____ Obedience Class

Birthday Party

_____ Grooming

____ Portraits

Terms and Conditions:

- 1. Full payment plus tax due before first session.
- 2. No refund or cancellations of this agreement.
- 3. All dogs that enter our play areas must be social, have completed release forms be prescreened for fleas an need to be current on their DHLPP, Rabies and Bordella vaccinations. Proof must be provided.

Liability Release

Client agrees that Groomingdale's Doggie Day Care & Salon, LLC (Groomingdale's), its agents, members, subcontractors and employees will not be liable for any damage or loss resulting from other doges or the failure of the dog to respond to any commands taught by Groomingdale's or resulting from counseling and/or advice supplied to the owner of the dog. Should any behavior on the dog's part now or in the future result in damages to any property, another animal, the owner or a third person, owner agrees to assume full liability for any damages and to hold Groomingdale's harmless from any and all obligations, expenses and costs of litigation for such damage or injury. All dogs are trained, handled and cared for by Groomingdale's without any liability whatsoever for loss or damage from disease, death, running away, theft, fire, injury to persons, injury to other animals or property by the owner's dog or other unavoidable causes.

Client's Name:

Client Signature: