PET GROOMING CONSENT & RELEASE FORM

Shampoodle
17320 Saticoy St, Van Nuys, CA 91406
Ph: 818-423-0745 email: ccsla818@gmail.com
www.ccslosangeles.com



Client's Name _____

Address _____

_____

Phone _____ Email _____

Person(s) authorized to pick up my pet _____

_____

How did you hear about us? _____

Emergency contact name _____

Emergency contact phone _____

Pet's Name _____ DOB _____

Breed _____Sex _____ Age _____

Does your pet have any known medical issues?

_____

_____

_____

Is your pet taking any medications? _____

_____

What is your preferred method of contact for appointment reminders? (Please check one)

_____Phone Call _____ Text Message _____Email

Would you like to receive our free eblast newsletter? (please check one) _____Yes _____No

Occasionally we post photos of some of our favorite pets. Do we have your permission to post photos of your pet on our website and/or social media pages? (please check one) _____Yes _____No

Please review our policies and then sign and date at the bottom:

Emergencies: In the event of an emergency, I authorize this establishment to immediately seek professional veterinarian attention for my pet (at my expense). I understand that all attempts will be made to contact me in the event of an emergency.

Coat Condition: I understand that this establishment puts my pet's comfort above all else. In the event that my pet's coat is matted, I understand that the groomer may have to shave the matts out rather than perform a painful de-matting procedure. I also understand that if my pet is severely matted, that there is an increased risk for clipper burn or cuts to occur. I understand that all attempts will be made to prevent this, however, in many extreme matt conditions, if is unavoidable. I also understand that matted pets take additional time to groom so there will be an additional fee added on to the regular grooming price if my pet's coat is matted.

Health: I understand that grooming can be stressful to some pets and I will inform the groomer if my pet has any heart conditions or any stress related issues prior to grooming. I also understand that it is necessary to have my pet up to date on all vaccinations prior to every grooming.

Cancellation Policy: I understand that if I need to change my appointment time or cancel it, that I must give at least a 24 hour notice so that the appointment time can be made available to another client who is on the waiting list. If two appointments are missed without giving notice clients are then required to pre-pay prior to scheduling any future appointments.

I have read and understand the above policies: _____ _____

Name Date