

Grooming Form

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Cell Phone 1 _____

Cell Phone 2 _____

Email _____

How did you hear about us? _____

Pet Information:

Pet's name _____ Breed _____

Age _____ Color _____ Weight _____ Sex _____

Neutered/Spayed? Yes/No

Required vaccinations: Bordetella, DHPP and Rabies
(Proof of vaccinations must be provided for our files.)

Health Information:

Pre-existing or current medical conditions:

Allergies (Food, skin, etc.):

Does your dog have any areas of the body that they do not like being touched?

Does your dog have any aggression towards dogs? Humans?

Does your dog have any behavioral issues that may present a problem during the grooming?

Grooming Client Agreement

____ 1) The safety and comfort of your dog is of our utmost priority. However, accidents may occur during the grooming process. I will be notified immediately. Cool Dog Ranch will seek veterinary care if we feel the need is an emergency. All veterinary costs incurred are the responsibility of me, the dog owner.

____ 2) Pre-existing health conditions can sometimes be aggravated during or after a grooming experience. I am responsible to share any pre-existing medical concerns prior to grooming. I understand that any veterinary costs incurred are my responsibility.

____ 3) Cool Dog Ranch strives to be a parasite-free facility. If fleas/ticks are found on my dog, Cool Dog Ranch will treat them at the my expense.

____ 4) Cool Dog Ranch has the right to refuse service in the event my dog is too stressed or becomes aggressive during the grooming process. Partial payment will be collected for any service completed.

____ 5) In some cases, a muzzle must be used to ensure safety for the groomer. I am aware that a muzzle may be used in an extreme case as a last resort.

____ 6) I am aware that photographs of my dog may be taken and may be posted on social media.

I have initialed each statement above to acknowledge my understanding, agreement and acceptance:

Owner's Signature

Printed Name

Date