



NEW CLIENT FORM

PLEASE FILL OUT COMPLETELY, READ CAREFULLY AND SIGN BELOW.

OWNER'S NAME	
ADDRESS	
CITY, STATE & ZIP	
HOME/WORK PHONE	CELL PHONE
E-MAIL (FOR PROMOTIONS AND APPOINTMENT REMINDERS)	
HOW DID YOU HEAR ABOUT US?	

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>PET'S NAME</td></tr> <tr><td>BREED</td></tr> <tr> <td> <input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> SPAYED/NEUTERED </td> </tr> <tr><td>BIRTH DATE</td></tr> <tr><td>MEDICAL PROBLEMS?</td></tr> <tr><td>PAST GROOMING PROBLEMS?</td></tr> <tr><td>VETERINARY CLINIC</td></tr> </table>	PET'S NAME	BREED	<input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> SPAYED/NEUTERED	BIRTH DATE	MEDICAL PROBLEMS?	PAST GROOMING PROBLEMS?	VETERINARY CLINIC	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>PET'S NAME</td></tr> <tr><td>BREED</td></tr> <tr> <td> <input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> SPAYED/NEUTERED </td> </tr> <tr><td>BIRTH DATE</td></tr> <tr><td>PAST GROOMING PROBLEMS?</td></tr> <tr><td>VETERINARY CLINIC</td></tr> </table>	PET'S NAME	BREED	<input type="checkbox"/> DOG <input type="checkbox"/> CAT <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> SPAYED/NEUTERED	BIRTH DATE	PAST GROOMING PROBLEMS?	VETERINARY CLINIC
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If pet is hurt or becomes ill, Party of Two, Inc. d/b/a Canine Cuts has permission to obtain immediate medical care from the pet's veterinarian, or the veterinarian of our choice if pet's veterinarian is not accessible. Pet owner agrees to pay all costs for medical treatment provided, unless illness or injury is a direct result of negligence of Party of Two, Inc. d/b/a Canine Cuts employees. Party of Two, Inc. d/b/a Canine Cuts will not be held responsible for a sickness or injury caused by pet to itself during grooming. Party of Two, Inc. d/b/a Canine Cuts will not be held responsible for clipper burn and/or minor nicks resulting from grooming of matted, neglected coats or for irritation caused by removing coat from pets possessing mild to sever skin allergy, nor will we be held responsible for stressful effects grooming may have upon a geriatric pet.

Party of Two, Inc. d/b/a Canine Cuts will be notified within 48 hours of any claims by owner regarding compensation for medical attention given as a result of alleged negligence of our staff. In the event of dispute over owner's claim, Party of Two, Inc. d/b/a Canine Cuts will personally consult the attending veterinarian prior to settling any claim.

Party of Two, Inc. d/b/a Canine Cuts reserves the right to charge additional fees for services we consider over and above the norm covered by our standard rates. Owner agrees to be responsible for any property damage caused by their pet. Party of Two, Inc. d/b/a Canine Cuts reserves the right to refuse service to customers whose pet may pose a threat to our employees and other pets left in our care, whether it be an aggression problem, health problem, or parasite problem.

WE MUST HAVE COPIES OF YOUR VACCINATIONS AND RABIES INFORMATION.

OWNER'S SIGNATURE _____

DATE _____