GROOMING CONSENT FORM

Grooming Service Date:

Client Information					
First Name		Last f	Name		
		T			
Phone Number		Email Address	Conta	Contact Preference	
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Street Address	City	State		Zip Code	

Pet Information			
Pet Name	Breed	Age	
Gender	Color/Markings		

Medical Information			
Is your pet in good health?			
If no, please provide details of any health issues or medications:			

Emergency Contact	
Contact Name	Contact Phone Number

Grooming Services

I, the undersigned client, hereby authorize to perform the following grooming services on my pet:

Other Special Instructions or Requests			

I understand that grooming procedures can sometimes be uncomfortable for pets, and I agree to not hold or its employees responsible for any accidents or injuries that may occur during the grooming process. I also agree to disclose any special conditions or behavioral issues that my pet may have that could affect the grooming process.

I authorize any necessary actions if my pet requires immediate veterinary attention during the grooming session. I will be responsible for any associated veterinary expenses.

I have read and understand the terms and conditions of this consent form and agree to all the grooming services and policies as outlined.

Client Signature:		
Date:		

Please keep a copy of this consent form for your records.