

GROOMING CONSENT FORM

CLIENT'S NAME _____ PET'S NAME _____

Please select the type of service you would like to receive:

- Express Bath (Canine or Feline) - Our quickest service includes shampoo, conditioner, blow dry & brush out while you wait.
- Complete Bath (Canine or Feline) - Includes shampoo, conditioner, blow dry, brush out, nail trim, ear cleansing, anal gland expression (external), ribbon & fragrance.
- Complete Groom (Canine or Feline) - Includes complete bath & breed specific or customer requested haircut. Also, hair trim around paws, pad treatment, eye cleaning, eye area trim, and ear plucking (if necessary).
- Puppy & Kitten's First Groom - Includes shampoo, conditioner, blow dry, brush out, nail trim, ear cleansing, sanitary trim (if necessary). For puppies & kittens up to 40lbs or 5 months of age or younger.

Please select additional Treatments/Finishing Touches (Additional fees will apply to groom or bath services)

- De-shedding Treatment - A safe, unique method using professional hand brushing techniques & products to reduce shedding (undercoat & dead hair removal).
- Seasonal Spa Works - These selected scents smell great and are specially formulated to nourish, detangle and add shine to your pet's coat. This also includes our toothbrush service which helps to maintain proper dental health.
- Pad Treatment - Helps to maintain the durability of the pads to reduce cracking and helps strengthen nails to prevent splitting & breaking.
- Topical flea or flea/tick preventative. Type _____
- Teeth Brushing - Periodontal disease affects more than 85% of adult pets. As part of our grooming and bathing program we recommend dental care at this time.
- Color Nail Polish
- Sanitary Shaving

Hospital Policies:

All pets must be current on vaccinations and free of external/intestinal parasites in order to be groomed. If your pet's vaccines are not current, they must be updated in order to be groomed. ***I understand there are additional charges for these services.*** If your pet is found to have external/intestinal parasites, they will be treated and ***I understand there are additional charges for these services.***

Signs of anal sac discomfort includes "scooting" (dragging anus on floor), excessive licking under the tail and tenderness near the tail or anus. We provide external expression of the anal glands at no additional charge with our complete bath or

complete groom service. **I understand there are additional charges** if my pet requires internal expression of anal glands by a veterinarian due to a medical condition.

Please note that all prices vary depending on breed, size, coat condition, and special requests. We reserve the right to charge handling fees for excessively difficult/aggressive pets requiring additional staff and/or time in order that we may provide proper care. We reserve the right to reschedule your pet's grooming appointment if your pet is unable to be groomed without sedation.

Medical Conditions/Services:

Does your pet have any medical conditions that our groomer should be aware of? If yes, please provide us a brief explanation:

Occasionally, our groomer may note a possible non-emergency health problem with your pet (i.e. ear infection, skin condition, flea allergy, etc.), if so, may we have permission to examine & treat your pet?

_____ YES _____ NO

I am the owner or the agent for the owner of the animal described above, and I have the authority to execute this consent. I understand that I will be required to pay all charges incurred upon discharge of my pet. I have read the above information and understand the policies and information of the Capeway Veterinary Hospital grooming department.

REASONABLE PRECAUTIONS WILL BE USED AGAINST INJURY, ESCAPE, OR DEATH OF THIS PET. CAPEWAY VETERINARY HOSPITAL AND STAFF WILL NOT BE HELD LIABLE FOR PROBLEMS THAT DEVELOP PROVIDED REASONABLE CARE AND PRECAUTIONS ARE FOLLOWED. I UNDERSTAND ANY PROBLEMS THAT DEVELOP WITH MY PET WILL BE TREATED AS DEEMED NECESSARY BY THE STAFF VETERINARIANS AND I ASSUME FULL RESPONSIBILITY FOR THE TREATMENT AND EXPENSE INVOLVED.

Signed: _____

Phone number where I can be reached today _____

Vaccines:

In order to protect the health of your pet, this facility requires that all dogs have current rabies, DHPP, and *Bordetella* (Kennel Cough) vaccines, and cats have current rabies and DRC vaccines.

FOR OFFICE USE ONLY	
<u>EXPIRATION DATE</u>	<u>STAFF INITIALS</u>
DHPP/DRC _____	_____
DHP _____	_____
PARVO _____	_____
RABIES _____	_____
KENNEL COUGH _____	_____