

Grooming Release

Date: _____

Pet's Name: _____

Phone Number: _____ Alt. Phone Number: _____

Bath, nail trim, and ear cleaning are included in the grooming. Please specify if you do not want any of these procedures done or if you have any special instructions or medications. **WHEN DOUBLE COATED DOGS ARE SHAVED, COATS MAY GROW BACK DIFFERENTLY.**
Length desired and grooming details: _____

Please Circle the Following Options

Bows/Scarf : yes / no

Perfume/Cologne: yes / no

(Baby Powder, Marshmallow, Sugar Cookie, Georgio, Drakkar, Polo, CK1)

I would like the following additional procedures performed while here for grooming:

_____ Anal Glands external (internal is a \$22.00 charge)

_____ Teeth Brushed \$5.00 _____ Medicated/Oatmeal Shampoo \$5.00 _____

Conditioner \$5.00

_____ Other: _____

_____ Update Vaccines if needed

To prevent the spread of infectious diseases and parasites, hospitalized, boarded and grooming animals must be current on all vaccines and free of internal and external parasites. I authorize Pfister Animal Hospital to provide vaccinations as needed for my pet if proof of vaccines is not provided upon arrival.

DOGS- Rabies/Distemper/Parvo/Bordetella/Fecal Exam with negative result.

CATS- Rabies/Feline Distemper/Fecal Exam with negative result.

I understand that all fees incurred will be due upon dismissal of my pet from the hospital unless other arrangements have been made **in advance**. We will gladly provide you with a written estimate if you desire.

Please provide a written estimate _____

A written estimate is not necessary _____

I authorize Pfister Animal Hospital and it's staff to provide grooming services stated here.

Client Signature _____