

Grooming Admission & Consent Form

Date: _____

Owner's Name: _____ Pet's Name: _____

Phone Numbers: _____

(It is important for your groomer to be able to reach you when necessary)

Special Grooming Instructions: (Please be as specific as possible when completing this form, especially if Studio 7 Hills has never groomed your pet before)

- Would you like the Groomer to decide how your pet will look? Y N
- Does your pet have mats in their hair? Y N
- Does your pet have any fleas or ticks? Y N
- Do you want your pet shaved? Y N
- Do you want your pet to have a short body clip? Y N
 - If Yes, how short? Please describe: _____
- Do you want your pet to have a specific breed trim? Y N
 - If yes, please describe: _____
- Any specific problems to address while grooming? _____
- Any other special instructions you have concerning your pet? _____
- Please check any *additional* services you would like today for your pet:
(These items are at an Additional Cost)
 - Brush Teeth Dry Skin Treatment White hair Treatment Flea/Tick Treatment
 - Nail Filing (Dremel) FURminator Brush-Out De-Odorize/Skunk Specialty Shampoos
- Veterinary Services to be performed (*Morning Appointments only*):
 - All Services Due Complete Physical Exam Stool/Fecal Exam
 - Heartworm Test (Dogs) Feline Leukemia/Aids Test (Cats) Homeagain Microchip

Vaccination Information: Studio 7 Hills requires current records of your pet's vaccinations. Rabies is a required vaccine for all pets. Dogs are required to have a current DHLHP vaccine and Cats are required to have a current FEVCR vaccine. (BORDETELLA is strongly recommended for the health of your dog.)

- Where was your pet last vaccinated, if not Seven Hills? _____
 - Would you like your pet vaccinated while here? Y N
- (Morning Appointments Only)**
- If yes, please check Vaccinations to be administered: (An Exam is **Required** for DHLHP and FEVCR)
 - All Vaccines Required Rabies DHLHP (Dogs) FEVCR (Cats) Bordetella (Dogs)

Emergencies: If the need for emergency care arises, I give my permission for such care to be administered as deemed necessary by the on-duty veterinarian at Seven Hills Animal Hospital. The vaccination information I have provided is accurate to the best of my knowledge.

Date: _____ Owner's Signature: _____