



Date: _____

Animal Owner First & Last Name: _____

Address: _____

Cell #: _____

Home #: _____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

Dog () Cat () Breed: _____ **Pet Name:** _____

Male () Female () Age: _____

When was the last time your pet was groomed? _____

Is your Pet Spayed or Neutered? Yes () No ()

Is your pet allergic to anything? Yes () No ()

Is your pet on any medication? Yes () No ()

Does your animal have any seizures? Yes () No ()

Is your Pet hard to handle? Yes () No ()

Does Your Pet Bite? Yes () No ()

Has any previous groomers complained about the behavior of your pet? Yes () No ()

Veterinarian Name: _____

Phone #: _____

Rabies Certificate: Yes () No ()

How did you hear about us?: _____



Please list any medical conditions such as colitis, loss of hearing, loss of eyesight, back/leg issues, allergies or anything that is not listed here that we should know about: _____

Please Note: In the event of any emergency, you authorize this establishment to provide necessary treatment for your pet at your expense. If your pet has any medical conditions or is under any medication we will not be held responsible if any health issues arise while under our care.

LATE RESCHEDULING/CANCELLATION AND MISSED APPOINTMENT POLICY

Our practice has found it necessary to implement and enforce a missed appointment/cancellation policy due to the ongoing issue of clients cancelling without giving adequate notice for our staff to fill the appointment. Missed appointments result in a loss of valuable time that could be spent with clients in need of grooming care and they are very costly to our office. This is a standard policy in most places. We understand that there are times when you must miss an appointment due to emergencies or obligations for work and family and we do take these exceptions into consideration.

Late Cancellation: A late cancellation is considered when a client fails to cancel their scheduled appointment with less than 48 business day hours advance notice (weekend days do not count). Our office will call and confirm your scheduled appointment one business day in advance. If you decide to cancel your appointment during this time you will be charged \$50 because it's too late for us to fill your time slot.

No Show Policy: A "no show" is someone who misses an appointment without cancelling it in an adequate manner which is at least 48 business day hours in advance. A failure to be present at the time of the scheduled appointment will be recorded in the clients chart as a "no show". A \$50 "no show" fee needs to be paid during the check in at your next office visit before any additional services can be provided.

Late Appointment Arrival: As a courtesy to others we reserve the right to reschedule your appointment if you are 1 hour late arriving to your appointment. We will try to accommodate your appointment if our schedule allows. However, if it can't be done, we may ask you for you to reschedule your appointment.

Signature:
