GROOMING CONSENT FORM

Grooming Service Date:

First Name		st Name	
Phone Number	Email Address	Contact Pr	eference

Pet Information			
Pet Name	Breed	Age	
	·	·	
Gender	Color/Markings	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	

Liability Waiver:

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.