## **Pet Pampering Grooming, LLC Pet Service Contract**

Pet Owner Information:  Name:
Pet Information:       Birthday:         Name:       Age:Weight:       Sex: Neutered/Spayed         Breed:       Color/Markings:
Clinic Name:
Emergency Contact Information: This person must be available to take your dog in the event of an emergency.  Name: Phone: Cell Phone:
Office use only below this line
Vaccination Date Given & Duration of Vaccine:   Rabies:

## Pet Pampering Grooming, LLC Master Pet Service Contract

Please read thoroughly and sign at bottom where indicated. The word owner applies to the pet's owner and the word pet applies to the pet noted on page 1.

**Length of Contract**: This contract applies to each and every time the pet is at *Pet Pampering Grooming LLC*.

<u>Vaccinations</u>: The owner acknowledges that the pet has not been exposed to any communicable diseases in the last 30 days including, but not limited to rabies, distemper, bordetella, and the canine flu. The owner must provide <u>written</u> documentation from the pet's veterinarian that all required vaccinations are current. All *Pet Pampering Grooming* clients must have current Rabies, DHLPP and Bordetella vaccinations from a veterinarian on file. Please talk to your vet for more information regarding these vaccines.

Aggressive or Dangerous Pets: Owners MUST inform *Pet Pampering Grooming* if your pet bites, has bitten, or is aggressive to people, other pets or specific grooming procedures. Muzzles may be used if necessary. Muzzling will not harm your pet, and it protects both the pet and the groomer. We reserve the right to refuse/stop services for such pets at any time before or during the grooming process, and charge a Handling Fee in addition to the regular grooming charge.

<u>Health or Medical Problems & Senior Pets</u>: Grooming procedures can sometimes be stressful, especially for a senior pet or pet with health problems, and can expose hidden medical problems or aggravate a current one during or after the groom. Because senior pets and others with health problems have a greater chance of injury, these pets will be groomed for cleanliness and comfort, in styles that will not add to their stress.

Additionally, there is always the possibility an accident could occur. Grooming equipment is sharp, and even though we use extreme caution and care in all situations, possible injuries may occur including cuts, nicks, scratches, etc. In the best interest of your pet this contract/agreement will give Pet Pampering Grooming permission to obtain immediate veterinary treatment for your pet should it be deemed necessary. We will do our best to contact you first, if contact cannot be made we will take your pet to your authorized clinic or to the nearest facility that is available. It is agreed that all expenses for veterinary care will be covered by the pet's owner upon signing this contract.

<u>Parasites</u>: If you suspect your pet has fleas or ticks, prompt and thorough action on YOUR part is needed. Flea infestations can lead to tapeworm and other health problems. If fleas or ticks are found during the grooming process, your pet will be treated with a natural product to kill the parasites and additional charges will apply. If ticks are found they will be removed. Please note that parasites are a health hazard to your pet as well as to humans.

Additional Services: External expression of anal sacs, nail trims and ear cleaning are included with every grooming service unless the owner requests otherwise. External expression of anal sacs without a grooming service is a \$10 charge. Please note that we are not a veterinarian and will only do exterior anal gland expression. You may still need to take your pet to a vet if problems are still occurring for internal expression. Ear cleaning without a grooming service is a \$5 charge. Nail trimming without a grooming service is a \$15 charge. Nail grinding and nail painting may be requested at the time of any services for an additional \$5 charge for each. Teeth brushing may also be requested for an additional \$10 charge. This is not a deep teeth cleaning and is only used as prevention for tooth decay with additional brushing at home.

<u>Mat Removal</u>: Pets with matted coats need extra attention during their grooming session. Mats left in a pet's coat only grow tighter, and can strangle the pet's skin, or eventually tear it open. *Pet Pampering Grooming* does not wish to cause serious or unnecessary stress to your pet and since mats can be very difficult to safely remove, they may require the pet to be shaved. Removing a heavily matted coat includes risks of nicks, cuts or abrasions due to warts, moles or skin folds trapped in the mats. Heavy matting can also trap moisture and urine near the pet's skin allowing mold, fungus or bacteria to grow, causing skin irritations that existed prior to the grooming process. Torn skin from

mats can also harbor maggots. After effects of mat removal procedures can include itchiness, skin redness, self-inflicted irritations or abrasions. Shaved pets are also prone to sunburn. In some cases, pets may also exhibit brief behavioral changes. Prevention is the best defense against matting by scheduling regular grooming appointments. There may be an extra charge for mat removal depending on the severity.

Additional Fees: Cancellations must be made at least 48 hours in advance to avoid a \$20.00 "No Show Fee" which will be added to your next service. **NOTE:** Clients arriving 20 minutes late risk losing their appointment without notice. A \$30.00 fee will be applied for all checks returned for Non-Sufficient Funds.

<u>Pick-Ups</u>: Dogs will be given an ESTIMATED time of completion. Please understand that this is an estimation and for reasons beyond our control, circumstances may arise where grooming may be done early or may take longer than initially estimated. You will be called to pick up your dog as soon as he/she is ready. Pets must be picked up in a timely fashion after the owner is notified that the grooming services are complete. The owner also understands that the pet will not be released to any other person unless authorization is provided below. The owner's signature below serves as consent for these people to pick up the said pet from *Pet Pampering Grooming*.

## The following people may pick up my pet listed previously at any time from Pet Pampering Grooming LLC:

NAME	HOME PHONE	CELL PHONE

<u>Permissions Granted</u>: By signing this contract, which is legally binding, the owner acknowledges understanding this contract and gives his/her permission for the following:

- a.) The signature serves as a legal consent for veterinarian treatment and agreement to pay for the costs of such care.
- b.) Photographs of the pet may be used on our social media pages or in the local media. The owner may or may not be notified of such.

<u>Liability waiver</u>: The owner agrees that *Pet Pampering Grooming LLC* does everything possible to ensure that the pet will not contract a communicable disease or injure itself during its stay at the facility. Furthermore, the said owner agrees to hold <u>harmless</u> *Pet Pampering Grooming LLC* for any and all such occurrences. It is also agreed that the said pet is cared for without liability on the part of *Pet Pampering Grooming LLC* in the unfortunate event of fire, theft, running away, death or a natural disaster.

acknowledge that I agree to hold Pet Pampering	et Pampering Grooming LLC. By signing this contract, I Grooming, it's owners, operators, employees, officers and im arising from any condition of the undersigned pet, either LLC.
Signature	Date Date

## **Medical & Behavioral History**

Pet's Name:			
ret s Name.			

Please list below any acute or chronic medical and/or behavioral conditions your pet may have and how you treat the condition. Include any signs or symptoms the staff should watch for which might indicate a worsening of the condition. Note any physical limitations. List issues such as fear biter, separation anxiety, constant licking, etc. List any medications in the boxes provided. Use a separate piece of paper if more space is needed.

1.) \_\_\_\_\_

2.)			
3.)			
4.)			
ALLERGIES			
MEDICATIONS			
Drug name:	Reason given:		
Dosage(amount):	Times given:		<del></del>
Method used to administer drug:		DATE:	
Drug name:	Reason given:		
Dosage(amount):	Times given:		<del></del>
Method used to administer drug:		DATE:	
Drug name:	Reason given:		<del></del>
Dosage(amount):	Times given:		
Method used to administer drug:		DATE:	
Drug name:			
Dosage(amount):	Times given:		
Method used to administer drug:		DATE:	