



PET GROOMING FORM

Animal Kindness Veterinary Hospital

4910 E. Bonanza Rd. Las Vegas, NV 89110

T: 702-453-2990 | F: 702-453-6647

www.animalkindnessvet.net

CLIENT ID

Client's Name: _____ **Phone:** _____

Address: _____

Email: _____

Emergency Contact: _____ **Phone:** _____

Person(s) authorized to pick up my pet: _____

Pet's Name: _____ **Age:** _____ **Sex:** F | M | FS | MN

Breed: _____ **Color:** _____ **Weight:** _____

Health Issues / Pre-existing conditions: _____

Behavior notes: _____

Pet's Name: _____ **Age:** _____ **Sex:** F | M | FS | MN

Breed: _____ **Color:** _____ **Weight:** _____

Health Issues / Pre-existing conditions: _____

Behavior notes: _____

Please review our policies and then sign and date at the bottom:

Emergencies or Medical Illness:

Animal Kindness will attempt to contact and notify the owner if the pet would become ill during it's stay via the primary and emergency contact numbers provided. If the owner, or emergency contact, is unable to be reached, the veterinary on staff will use his/her judgement of the animal's health to proceed. If the animal's health demands quick action, and the owner is still unable to be contacted, the veterinary will administer medical and/or surgical treatment (at owner's expense) as needed until the owner can be reached.

Coat Condition:

I understand that this establishment puts my pet's comfort above all else. In the event that my pet's coat is matted, I understand that the groomer may have to shave the matts out rather than perform a painful dematting procedure. I also understand that if my pet is severely matted, that there is an increased risk for clipper burn or cuts to occur. I understand that all attempts will be made to prevent this, however in many extreme matt conditions, it is unavoidable. I also understand that matted pets take additional time to groom so there will be an additional fee added on the regular grooming price.

Health:

I understand that grooming can be stressful to some pets and I will inform the groomer if my pet has any heart conditions or any stress-related issues prior to grooming. I also understand that it is necessary to have my pet up to date on all vaccinations prior to every grooming.

Cancellation Policy:

I understand that if I need to change my appointment time or cancel it, that I must give at least a 24 hour notice so that the appointment time can be made available to another client on the waiting list. If two appointments are missed without giving notice, client's are then required to pre-pay prior to scheduling any future appointments.

Social Media:

Occasionally we post photos of some of our favorite pets. Do we have permission to post photos of your pet on our website and/or social media pages? (please check one) _____ Yes _____ No

Owner's Signature: _____ **Date:** _____



Grooming Services Request Form

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Pet's Name: _____ **Age:** _____ **Weight:** _____

Breed: _____ **Color:** _____ **Coat:** Short Medium Long

Bath
Includes: Shampoo/Conditioner, blue-berry facial, hand-drying, full brushing/deshedding, external anal gland expression, ear cleaning, nail trimming/grinding, finishing spray/perfume, and bow/bandana.

Full Service
Includes: Desired cut and style, shampoo/conditioner, blue-berry facial, hand-drying, full brushing/deshedding, external anal gland expression, ear cleaning, nail trimming/grinding, finishing spray/perfume, and bow/bandana.

****Full Service Cut:**

Would you like a traditional breed cut? Yes _____ No _____

If no, how short would you like the fur: #10 Blade #7 Blade #5 Blade #4 Blade #3 Blade
1/16" 1/8" 1/4" 3/8" 1/2"

Additional Grooming Instructions: _____

Report Card

Date: _____

	A	Angel!	B	Paw-fect!	C	Satisfactory	D	Needs special care
I was puurrfect for:	<input type="checkbox"/> Bath		<input type="checkbox"/> Nails		<input type="checkbox"/> Ears		<input type="checkbox"/> Dryer	<input type="checkbox"/> Brushing
	<input type="checkbox"/> Clippers		<input type="checkbox"/> Feet		<input type="checkbox"/> Face		<input type="checkbox"/> Cage	
I need some work with:	<input type="checkbox"/> Bath		<input type="checkbox"/> Nails		<input type="checkbox"/> Ears		<input type="checkbox"/> Dryer	<input type="checkbox"/> Brushing
	<input type="checkbox"/> Clippers		<input type="checkbox"/> Feet		<input type="checkbox"/> Face		<input type="checkbox"/> Cage	
My groomer said:								
	<input type="checkbox"/> My coat was in excellent condition!							
	<input type="checkbox"/> I could use some more brushing / combing.							
	<input type="checkbox"/> I had fleas and/or ticks! Whoah!							
	<input type="checkbox"/> Other: _____							

I should be groomed again in _____ weeks and brushed every _____ day(s).

I could use another nail trim in _____ weeks.

Wellness Review

My technician today was _____, who told me that:

- I looked well and didn't need to see the vet until my next visit, whew!
- I had a few things that were concerning and were looked at by Dr. _____.
- | | | | | |
|--------------------------------------|------------------------------------|--------------------------------|--------------------------------|---------------------------------|
| <input type="checkbox"/> Lumps/Bumps | <input type="checkbox"/> Ears | <input type="checkbox"/> Skin | <input type="checkbox"/> Eyes | <input type="checkbox"/> Weight |
| <input type="checkbox"/> Teeth | <input type="checkbox"/> Allergies | <input type="checkbox"/> Wound | <input type="checkbox"/> Other | |

Comments / Recommendations: _____

