

## **Knoxville Animal Clinic, LLC Grooming Policy and Form**

***\*\*Signature required at bottom of page for consent to groom your pet\*\****

Date: \_\_\_\_\_ PET NAME: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

**PHONE # where you can be reached today:** (       ) \_\_\_\_\_

**What is your pet here for today?** \*All grooms include nail trims and anal gland expression.

**CIRCLE ONE: Bath and Brush (no haircut) or Bath and Hair Cut/Groom**

\*Please indicate if you would like a veterinary assistant to express the anal glands for an extra \$15.00:                      **YES                      or                      NO**

\*Please indicate if you would like us to Dremmel your pet's nails (in addition to the nail trim) for an extra \$20.00:                      **YES                      or                      NO**

**Please circle all items brought with your pet today:**

**Collar                      Color of collar(s):** \_\_\_\_\_

**Leash                      Color of leash:** \_\_\_\_\_

### **Knoxville Animal Clinic, LLC** **Grooming Release Form:**

Release for treatment, I the undersigned do certify that I am the owner, or authorized agent of the owner of this animal(s); that I hereby authorize Knoxville Animal Clinic, LLC, their agents and representatives, to perform physical examinations, administer drugs or vaccines, or other such treatment(s) as the veterinarian deems necessary while grooming. I agree to accept responsibility for the payment of all services rendered.

All grooming animals are required to be up to date on vaccinations, free of parasites, fleas, and ticks. If your pet is not up to date on vaccines, you pet will be required to have an exam and vaccines will be administered. **\*PLEASE NOTE: Any grooming animal must have an up to date Bordetella (kennel cough) and rabies vaccine to be groomed. Rabies vaccinations cannot be given without an exam from a veterinarian.** If fleas/ticks are found on your animal, treatment will be given and charged to your account.

In the event this account is referred to an outside agency, credit reporting bureau, or attorney for collection, I agree to pay all attorney fees, collection costs, court costs, and/or any other expenses incurred during collection. I hereby state that I have read this release, that I understand the agreement and that I may request a copy of this agreement.

**Owner/Owner Agent Signature:** \_\_\_\_\_