



Client Grooming Agreement

Date: _____ Owner's Name: _____ Pet's Name: _____

What is your preferred method of contact? **Phone** **E-Mail** **Text**

Phone number: _____ E-Mail: _____

*Pick up times are from 2:30 pm to 5:00 pm. You will be contacted when your pet is ready for pick up.

Has your pet been groomed before? **Yes** **No**

*We recommend a bath & tidy for first time grooms to help acclimate your pet to the grooming process.

Grooming Instructions- **please select**

- Bath & Haircut (Includes Tidy and all over haircut)
- Bath & Tidy (Includes ONLY face, feet, tail, and sanitary trim)
- Same Groom as Last Time
- Shave Down
- Refer to Picture
- Special Instructions (preferred length, shampoo, etc): _____

*There is an additional fee for difficult de-matting (to be determined by the groomer) or shaving of neglected coat. In certain circumstances, shaving may be required for the comfort of your pet.

Aggressive Pets: Valleydale Animal Clinic reserves the right to stop services for aggressive pets for the protection of your pet and the groomer. You will be notified by your preferred contact method to discuss whether or not sedation is an option for your pet. Additional fees may be incurred for special handling and/or sedation.

Permission to sedate: **Yes** **No** If yes, please sign _____

Current Vaccinations/Veterinarian Information: Current vaccinations are required for your pet to be groomed. Any pet that needs sedation or medical treatment of any kind will require an examination by the veterinarian.

I have read and agree to the policies of Valleydale Animal Clinic and all of the above information.

Signature: _____ Date: _____