

Center Veterinary Hospital
Request for Grooming Services

All Pets must be current on all vaccines in order to be accepted for grooming services. If vaccines were given elsewhere, please specify the name of the hospital where they were administered.

NOTE: IF YOU WANT THE DOCTOR TO CHECK YOUR PET THERE WILL BE AN ADDITIONAL CHARGE.

Pet's Name: _____

_____ SUMMER CUT: very close all over (for any breed)

_____ STANDARD COCKER CUT: longer skirt and legs; very close back, head and belly.
Ears are trimmed to proportion.

_____ SCHNAUZER CUT: close back and head; feathered legs, skirt and face.

_____ POODLE CUT: to your specifications, most common is: Close all over, clean face
and feet; top knot and ears trimmed to proportion.

_____ SPECIAL INSTRUCTIONS: (brows, mustache, ears and tail)

Note: If your dog is matted, it may require shaving. This will not be done unless every attempt has been made to **contact the party at the number given below. Also, if your animal has fleas they will be treated at the owner's expense.**

***** THERE ARE NO REFUNDS ON GROOMING SERVICES! PLEASE BE CERTAIN THAT YOU INFORM THE GROOMER OF YOUR EXACT REQUEST. IF YOU ARE NOT CERTAIN, PLEASE ASK THE GROOMER TO HELP YOU IN YOUR DECISION.**

*****Are there any chronic medical/behavioral issues that should be noted? (i.e. nervous, back problems, aggressive nature, etc.) Please explain:** _____

Owner's Signature: _____

Date: _____ Phone number where you can be reached today _____