

Grooms by Leah

Client Information:

Name _____
 Address _____ City _____ St _____
 Zip _____ Phone or Cell _____ Wk _____
 Email: _____

Groom

Pet Information:

Name Breed Color M F N/S Weight DOB.
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____

Clinic/Vet _____ Phone _____
 Address _____ City _____ St _____ Zip _____
 Current on Vaccines _____
 Additional Med. Info. _____
 Groom Instructions: Bandana _____ Bow _____ Teeth Brush _____
 Defirminate _____ Flee Dip _____ Medicated Shampoo _____

Free Bath

Groom

Free Bath

Groom

Date:	Groom Instructions:	Price:

I _____, upon notice of completion of groom, agree to pick up pet(s) by 5:30PM, after 5:30PM without explanation constitute a daycare fee of \$12.00 to be added and after 6:PM without notice the pet will kept over night and a full night charge will be added.

Free Bath

Release: I certify that I, _____ am the owner of the animal/animals above, and hold harmless Grooms by Leah of any injuries to such animal, caused by animal in groom process. Should any accident occur we give Grooms by Leah to obtain on my behalf and in my pets best interest veterinary care necessary to treat sickness or injury and pay for all treatment and any damages caused to facility during its stay at this facility.

Owner/Customer _____ Date ____ / ____ / ____

How did you find out about us? _____