



Grooming Consent Form

Pet Owner/Guardian Name _____ Phone _____

Pet Name(s) _____

Pet Liability: The person who presents the pet shall be deemed the authorizing agent for all grooming instructions and procedures for the pet, and shall be referred to as **owner/guardian**. *Owner/guardian agrees to pet liability conditions.* _____

Current Vaccinations Information: *By signing this consent form, owner/guardian confirms that their pet is current on **Rabies, Distemper (for cats), and Bordatella (for dogs)** vaccination. Proof of vaccination must be provided to Caring Hands Veterinary Hospital prior to grooming.* _____

Aggressive Pets: *By signing this consent form, owner/guardian agrees to inform Caring Hands Veterinary Hospital staff of potential aggressive behavior towards people or animals that their pet may display. In the event that a pet is aggressive, a muzzle may be used. Muzzles are not harmful to pets, but keep groomers and your pet safe. Caring Hands Veterinary Hospital reserves the right to refuse or stop services for aggressive pets at any time before or during the grooming procedure.* _____

Accidental Injury: Although groomers use extreme caution and care in all situations, grooming equipment is sharp and there is always potential for accidents, including cuts, nicks, scrapes, and quicking of nails. *By signing this consent form, I confirm that I understand the risk of accidental injury to my pet.* _____

Health & Medical Problems: Grooming procedures can occasionally be stressful, especially for senior or ill pets, and can expose unknown or magnify diagnosed medical problems. Because these pets are at greater risk for injury, they will be groomed in accordance to their comfort. Caring Hands will do their best to contact pet owner/guardian if medical treatment is deemed necessary. *In the best interest of my pet, I give Caring Hands Veterinary Hospital consent to administer immediate veterinary treatment as deemed necessary.* _____

Sedation: Caring Hands Veterinary Hospital provides sedated grooming for fearful or aggressive pets, with the approval of a veterinarian. If owner/guardian is unable to be contacted for authorization to sedate, grooming will be discontinued, and owner/guardian will be responsible for any incurred grooming charges. *Owner/guardian agrees to provide a phone number to discuss sedation with a veterinarian if necessary.* _____

Mat Removal: Pets with matted coats require additional care and attention, as mats can be difficult to remove. The groomer will attempt to brush out mats, but severe matting may require the pet be shaved. Intense matting or brushing can cause dermatitis, irritation, and brush-burn, along with nicks or cuts. *Owner/guardian consents to mat removal procedures, and acknowledges risk to pet.* _____

Groom Satisfaction: If grooming is deemed unsatisfactory by owner/guardian, Caring Hands Veterinary Hospital requests that issues or concerns brought to our attention at the time of pick-up. If concern is not raised before the pet leaves the hospital, our staff cannot adequately assess or address any issues. *Owner/guardian agrees to notify Caring Hands Veterinary Hospital groomer or attendant of unsatisfactory groom at time of pick-up.* _____

Pet Owner/Guardian Signature _____ Date _____