



## Grooming New Customer Form

Owner's Name: \_\_\_\_\_

Address including zip code: \_\_\_\_\_

### Contact Numbers:

Home: \_\_\_\_\_

Cell: \_\_\_\_\_ Person: \_\_\_\_\_

Cell: \_\_\_\_\_ Person: \_\_\_\_\_

Work: \_\_\_\_\_ Extension: \_\_\_\_\_

Email: \_\_\_\_\_

Please check preferred contact #

*By providing an email address you will be receiving newsletters and other correspondence*

How did you hear about us? \_\_\_\_\_

It is our goal that all pets have a pleasant and easy experience. However, it is important to understand that some pets react differently to grooming. Sometimes preexisting conditions arise such as allergies, moles, clipper sensitivity, mats and tangles, behavioral issues, health issues, etc. As the pet owner, please inform us of any issues you are aware of prior to grooming.

I, \_\_\_\_\_, understand that Animal Friends Alliance requires all pets to be up to date on vaccinations including but not limited to rabies, distemper, bordetella, and parvovirus. By signing below I agree that my pet is current on all vaccines and that I give my authorization for Animal Friends Alliance to access my pets records with my veterinarian for verification purposes.

### Please check each box in acknowledgment of our grooming attendance policy:

- Tardiness for appointments beyond ten minutes may result in the cancellation of grooming appointment. If said appointment is kept a \$10 fee per dog will be added to the cost of the service performed that day and will be charged at pickup.
- Additionally, same day cancellations of grooming appointments will incur a \$10 fee that will be added to the amount due of the rescheduled appointment. **Three cancellations will result in future decline of service.**
- An AFTER HOURS pick up fee of \$25 per pet will be accessed for each pet that is picked up after the close of business hours unless previously arranged.*

The undersigned pet owner or agent agrees to not hold Animal Friends Alliance liable for any damage, loss or claims arising from preexisting and/or unrelated conditions, either known or unknown to Animal Friends Alliance, I understand that my dog will be tethered during grooming. In the event of an emergency, I authorize this establishment to obtain any necessary treatment for my pet and agree to pay all associated costs. I also allow permission of my pet to be photographed and said pictures to be used for advertising and marketing purposes, including social media. I also understand on rare occasions Animal Friends Alliance might use products (example: Dawn dish soap during deskunking or degreasing services) that are not approved for animal use and allow them to use their professional opinion on when this is appropriate for my pet while in their care.

**Peanut products are used heavily at our facility. Please notify our staff if anyone in your household has a nut allergy.**

I have read and understand the above policies.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please fill out 2nd side for pet information.**

## Pet Information

**Pet's Name:** \_\_\_\_\_ Species: Dog  Cat  Other: \_\_\_\_\_  
Breed: \_\_\_\_\_ Cats Only: Long Hair  Medium Hair  Short Hair   
Color: \_\_\_\_\_ **Age/DOB:** \_\_\_\_\_  
Sex:  F  M Spayed/Neutered:  Y  N Animal Friends Alum:  Y  N

### Medical History

Regular Veterinarian: \_\_\_\_\_

*Animal Friends Alliance requires all dogs and cats are up to date on vaccinations including but not limited to rabies, distemper, bordetella, and parvovirus for dogs and FVRCP (distemper) and rabies for cats. I agree that my pet is current on all vaccines and that I give my authorization for Animal Friends Alliance to access my pets records with my veterinarian for verification purposes.*

**Owner Initial:** \_\_\_\_\_

#### Please check any medical history that pertains to your pet:

- Diabetes  Seizures  Heart Conditions: \_\_\_\_\_  Breathing Difficulties: \_\_\_\_\_  
 Arthritis  Visual Impairments  Hearing Impairments  Orthopedic Issues: \_\_\_\_\_  
 Allergies: \_\_\_\_\_  Ear Infections  Skin Issues/Hair Loss: \_\_\_\_\_  
 Thyroid/Cushing's Disease  FIV or Feline Leukemia (cats)  Other: \_\_\_\_\_

**Animal Friends Alliance Grooming does not offer Ear Plucking as a service, as we refer to the care of your veterinarian.**

Does your pet need a hypoallergenic shampoo?  Y  N

Current Medication(s): \_\_\_\_\_

### Behavior History

***Animal Friends Alliance regularly works with dogs with extreme special needs or behavior issues.***

***Please help us and your pet succeed by providing clear and honest behavior information.***

#### Please check any that apply:

- Shyness  Anxiety  Flight Risk  Fear of People: \_\_\_\_\_  Animal Aggression  High Prey Drive  
 Food Aggression  Separation Anxiety  Kennel aggressive  Noisy  Prone to stress related diarrhea  
 History of abuse/neglect/puppy mill dog/hoarding: \_\_\_\_\_  
 History of aggressive behavior: \_\_\_\_\_  
 Other: \_\_\_\_\_

Can your pets be kenneled together:  Y  N **\*We do not kennel dogs from different families together.**

Does your pet need a muzzle for parts of the grooming or vetting process?  Y  N  Don't know

Does your pet have a history of biting?  Y  N

If yes, please explain: \_\_\_\_\_

Does your pet have a documented bite through law enforcement?  Y  N

If yes, please explain: \_\_\_\_\_

Has your pet been turned away from a previous groomer for behavior issues?  Y  N

If yes, please explain: \_\_\_\_\_

Did your veterinarian refer you to Animal Friends Alliance for behavior related grooming issues?  Y  N

If yes, please explain: \_\_\_\_\_

Is your pet currently sedated/medicated?  Y  N Do you plan to do this before every grooming?  Y  N

What medication and time given: \_\_\_\_\_

***Animal Friends Alliance Grooming may charge additional fees for the handling of extremely special needs or fractious pets and these fees will be applied at our groomers' discretion. These fees will not be used for minor issues or easily manageable biting behavior.***