Welcome to Our Canine Spa



Please complete this form so that we may better serve you and your pet. Thank You!

Owner's Name	Date
Address:	
Tel #	Email:
Pet's Name	First Groom: Y or N
Veterinarian:	
How would you like your pet groomed	today:
• 1	blease provide specific instructions making sure ties your pet may have. Your groomer will review ide a brief description:
 □ The usual clip □ Just a Bath & Brush, Nails and □ Today, my pet may be sensitive □ I have supplied my pet's shame □ Please pay special attention to 	e about 2000
When my pet is ready to come home	<u>:</u>
☐ Please call me! I can be reache	ed at the following #:
☐ I will arrive to pick my pet up	at the following time: