



Welcome to Maplewood Career Center Dog Grooming!

Owner(s): _____

Mailing address: _____ City/State/Zip: _____

Email address: _____

Phone: _____ Emergency Contact Phone: _____

First Pet's Name: _____

Breed: _____ Color: _____

Age: _____ Choose: Intact Female / Spayed Female / Intact Male / Neutered Male

Second Pet's Name: _____

Breed: _____ Color: _____

Age: _____ Choose: Intact Female / Spayed Female / Intact Male / Neutered Male

Does your pet have any medical problems **past or present**?

Name of Veterinary Clinic: _____

What services would you like performed on your dog today?

First dog: [Circle all that apply] (Ears are cleaned on EVERY dog)

Bath Nails Teeth Brushed Anal Glands Externally Expressed Hair Cut De-Shed Treatment

Do you or your dog have allergies and require Hypo allergenic Shampoo? YES NO

What length would you like your dog's hair? ___1" ___ 5/8" ___ 1/2" ___ 3/8" ___ 1/4" ___ 1/8"

Additional Instructions (head, paws, legs, tail): _____

Second dog: [Circle all that apply] (Ears are cleaned on EVERY dog)

Bath Nails Teeth Brushed Anal Glands Externally Expressed Hair Cut De-Shed Treatment

Do you or your dog have allergies and require Hypo allergenic Shampoo? YES NO

What length would you like your dog's hair? ___1" ___ 5/8" ___ 1/2" ___ 3/8" ___ 1/4" ___ 1/8"

Additional Instructions (head, paws, legs, tail): _____

I, the undersigned, fully understand that the services I have requested for my pet are part of an educational project and therefore the complete work cannot be guaranteed. I also understand that these services are being performed by students under the supervision of the instructor, and I hereby release Maplewood Career Center and all the school personnel from any and all liability due to mistakes in grooming, accident, or injury to my animal.

Date: _____ Signature: _____

Side is for Student use ONLY.]

Weight of 1st Pet _____ Weight of 2nd Pet _____ Total Cost _____ Paid? _____ Both Vaccines UTD? _____

What services were performed on this dog?

First dog: [Circle all that apply] Were ears cleaned? _____ How did they look before cleaning? _____

Bath Nails Teeth Brushed Anal Glands Externally Expressed Hair Cut De-Shed Treatment

What Shampoo was used? _____ What Conditioner? _____

What blade/comb used? _____ JR Groomers: _____ SR Groomers: _____

Second dog: [Circle all that apply] Were ears cleaned? _____ How did they look before cleaning? _____

Bath Nails Teeth Brushed Anal Glands Externally Expressed Hair Cut De-Shed Treatment

What Shampoo was used? _____ What Conditioner? _____

What blade/comb was used? _____ JR Groomers: _____ SR Groomers: _____

Were there any health problems, injuries, or lumps you noticed on check in of this animal? Note anything visible on Diagram One _____

Were there any health problems, injuries, or lumps you notices while grooming this animal? Note anything visible on Diagram Two _____



BOTTOM

TOP

DIAGRAM ONE



BOTTOM

TOP

DIAGRAM TWO