

WHITE OAK ANIMAL HOSPITAL

Grooming Check-in

Date: _____ Pet's Name: _____

ALL CLIPS INCLUDE:

- Bath
- Ear Pluck
- Ear Cleaning
- Nail Trim
- Anal glands expressed (externally)

EXTRA SERVICES (Please initial)
(These services are not included in the grooming price and are an additional fee)

Dremmel nails _____ / \$ _____
Leave on conditioner _____ / \$ _____
Medicated bath _____ / \$ _____
Frontline application _____ / \$ _____
Oral flea pill administration _____ / \$ _____ Product _____

GROOMING INSTRUCTIONS:

ADDITIONAL SERVICES (vaccines, exams):

MEDICATIONS TO GO HOME (flea/ heartworm):

Occasionally our groomer may note a possible health problem with your pet (i.e. ear infection, skin condition, flea allergy). If so, may we have permission to examine your pet? **There will be an additional charge for the exam.**

YES _____ NO _____

Some pets are difficult to groom, and this makes it extremely hard for our groomers to give a quality grooming. If this occurs, may we have permission to sedate your pet? **There will be an additional charge for sedation.**

YES _____ NO _____

Owner's signature: _____
Contact #: _____
Pick up time: _____

Were you quoted a price for your grooming today?
YES _____ / \$ _____
NO _____ / PLEASE CALL