## Grooming Authorization & Release – Pete Mac's ® Recreational Resort for Pets™

Name:		Emergency	Contact/Phone		
Address:					
Home Phone:		Work Phone:		Cellular:	
Veterinarian/Phone:					
Pet Name: A	ge:(Y)	(M) Color:	Breed:	Sex:Spayed/Nuetered?	Y or N
Shave Down Authorization: the grooming staff determines stress and discomfort it would special care given to safety, it	Shave Down that a shave of cause your point is possible for s Pete and Ma	Authorization is give down is the best recou et if we were to attem r your pet to be nicke c's from any responsi	en in the event that, aft urse for grooming you pt to brush or groom t d or cut or get razor bu bility for any trauma t	n. Completed? Employe er a thorough evaluation of your per pet. This decision is made based of heir coat. During a shave down, eve irn. Your signature acknowledges t o the pet as a result of the shave dow	t's coat, on the en with hat you
$\Box$ This authorization is for c	urrent visit on	ly (Initial)			
$\Box$ This authorization is on-g	oing, until I re	equest in writing that	t be cancelled.	(Initial)	
□ Please call me for an appr I hereby agree to the foregoin	-	•	_ , ,		
Customer Signature		D	ate	Pete & Mac's Employee	
Basic Information, Gro	oming Clie	ents Only			
How often does your pet usua	lly get groom	ed?			
Would you like to request a sp	pecific groome	er? If yes, who?			
What positive or negative exp	eriences with	grooming has your p	et had that you think w	e should know about?	
Are you satisfied with the con	dition of your	• pet's coat? What cha	inges, if any, would yo	ou like to make to your pet's coat?	
Does your pet have any specia	al concerns wi	th skin care? Please	mention any allergies	or sensitivities we should be aware of	of: