

DAILY PET SIGN-IN SHEET

Your pet is very important to us. Because we care, every effort will be made to make your pet's visit as pleasant as possible. Occasionally, grooming can expose a hidden medical problem or aggravate a current one. This can happen during or after the grooming procedure. Please advise your groomer of any problem areas or medical issues your pet may have. In the best interest of your pet we request your permission to obtain immediate veterinary treatment should it become necessary. Please sign this form below. Thank you.

#	Pet(s) Name	Signature	#	Pet(s) Name	Signature
1			21		
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By signing above, I hereby grant permission to The Pet Salon, Inc. to obtain immediate veterinary treatment for my pet should it be necessary. Also, realizing that my pet has a greater chance of injury during grooming due to various factors like age and condition, I will not hold the Pet Salon, Inc. or it's employees responsible for injury during or after the grooming procedure. I will be responsible for any emergency veterinary treatment that is deemed necessary.