

## Grooming Consent Form

Date:

Pet Name:

Owner:

Species:

Sex:

Address:

Breed:

Today's Phone Number:

As the owner of the above animal(s), I hereby give Chris (groomer at Animal Medical Services) permission to groom my pet. I also hereby give Animal Medical Services permission to do the following procedures and accept full financial responsibility:

Procedures to be done today:

**\*\*\*\*\*ALL ANIMALS ADMITTED MUST BE CURRENT ON THEIR VACCINATIONS AND FREE OF EXTERNAL PARASITES. VACCINATIONS WILL BE GIVEN AT THE OWNER'S EXPENSE IF THEY ARE FOUND TO BE OVERDUE. ANY ANIMAL FOUND TO HAVE FLEAS OR TICKS WILL BE TREATED AT THE EXPENSE OF THE OWNER.**

I understand that during the performance of these procedures, unforeseen conditions may be revealed that necessitate an extension or variance in the procedures set forth above. I expect Animal Medical Services to use reasonable care and judgement in performing the procedures. I am also aware that unforeseen events resulting from the procedures will not relieve me from any obligation to all reasonable costs incurred regarding the pet.

**By my signature below:**

1) I agree that if any unpaid balance is assigned to a third party collection agency for collection or placed with an attorney to obtain judgment or otherwise satisfy payment of this account, a collection fee equal to 33% of the unpaid balance will be added to my account and I agree to pay that fee.

2) I agree that I will pay reasonable attorney fees and court costs if a judgment is granted against me.

3) I authorize ANIMAL MEDICAL SERVICES and any of its agents to contact me by telephone, at any of the numbers provided including any wireless number for me and/or my spouse, which could result in charges to me. I acknowledge that I may also be contacted by sending text messages, and emails, using any email addresses provided. Furthermore, I also authorize methods of contact which may include using pre-recorded and/or artificial voice messages and/or automatic dialing devices, as applicable.

Signed (owner or agent of the owner):

Date signed: