

West Linn Grooming Intake Form

PLEASE EMAIL IN THE COMPLETED FORM TO WEST LINN SAFE & HOUND:

Subject: West Linn Grooming Intake Form Email: <u>Info@safeandhound.net</u>

Name:	
Additional Parent Name:	
Phone Number:	Email:
Grooming Services:	
What grooming services are you interest *Prices vary based on dog size, services and length	
a nail trim, ear cleaning and anal gland ex	
☐ Grooming (Hair Cut) ☐ Sanitary Clip or Single Area Trim	☐ Tooth Brushing ☐ Nail Trim or Dremel
Deshedding Brush Out	☐ Anal Gland Expression
Dog Information:	
Name:	
Breed:	
Gender: ☐ Male ☐ Female Weight:	_{LBS} Color:
Spayed/Neutered? ☐ Yes ☐ No H	Iave you ever take your dog to a groomer? ☐ Yes ☐ No
Are vaccinations up to date? (Rabies,	Bordatella, DHPP, Flea Treatment): ☐ Yes ☐ No
Veterinary Office Name & Phone Nun	nber:
Any prior experience at a groomer you	a want to let us know about?
DET DADENT SIGNATURE:	Data

West Linn Safe & Hound Location: 2320 Willamette Falls Drive, West Linn, OR 97068