



# ELITEPETRESORT



## Service Authorization

Owners Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Dog's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Breed: \_\_\_\_\_  
 Color/Identifying Marks: \_\_\_\_\_  
 Sex: M / F Spayed or Neutered? \_\_\_\_\_ Veterinarian Clinic: \_\_\_\_\_

### Grooming Pet Releases

**Matted** I am aware that my pet is heavily matted and authorize Elite Pet Resort to remove the mattes by shaving or heavy brushing. Although Elite Pet Resort will use all precautions during this process. I have been informed and understand possible reactions such as irritation, or nicks to the skin, and agree not to hold Elite Pet Resort Responsible for minor injuries to the skin that are a result of the dematting process.

Initials \_\_\_\_\_

**Aged Pet** I am aware that my pet is a "Senior Citizen" and that the process of grooming may be stressful. The stress of grooming may cause latent, unknown, or inactive conditions such as a heart, kidney, or liver disorders to become active and can result in illness, seizures, or the death of my pet. Although Elite Pet Resort will take reasonable care in the grooming of my pet, I acknowledge that the stress of grooming may initiate stress-related problems in the pet. I agree not to hold Elite Pet Resort responsible for reactions to grooming.

Initials \_\_\_\_\_

**Special Condition Pet** I am aware that my pet has "Special Conditions" and that the process of grooming may be stressful. The stress of grooming may cause known "Special Conditions" such as arthritis, bone, joint, or surgical sites to become active or inflamed, and unknown or inactive conditions such as heart, kidney, or liver disorders to become active and can result in illness, seizures, or the death of my pet. I agree no to hold Elite Pet Resort responsible for reactions to grooming.

Initials \_\_\_\_\_

**Flea/Tick Treatments (Oral Treatment/Spot On Treatment/Flea Shampoo)** I have requested that my pet be treated for fleas, ticks or other parasites. I have been advised that my pet may be sensitive to an ingredient in the flea/tick treatments. Although Elite Pet Resort will use reasonable care and precautions in the flea/tick treatment procedures, I agree not to hold Elite Pet Resort responsible for reactions to the flea/tick treatment process.

Initials \_\_\_\_\_

**Emergency** In the event of an emergency. I authorize Elite Pet Resort to see medical attention for my pet. I have read and understand the conditions above. I will not hold Elite Pet Resort responsible for any per-existing health problems my pet might have.

Initials \_\_\_\_\_

**Any behavioral issues the groomer should be aware of?** \_\_\_\_\_

I ACKNOWLEDGE MY PET WAS PROPERLY CHECKED IN WITH THE SERVICE RECOMMENDATIONS AND ESTIMATE LISTED. I UNDERSTAND THE TYPE OF GROOMING SERVICE RECOMMENDATIONS AND ESTIMATE LISTED. I UNDERSTAND THE TYPE OF GROOMING SERVICE MY PET WILL RECEIVE TODAY AND AGREE TO PAY ACCORDING TO THE PRICE ESTIMATE ABOVE. I ALSO UNDERSTAND THAT ELITE PET RESORT MUST PROTECT ALL CUSTOMERS' PETS AND IF FLEAS AND TICKS ARE FOUND ON MY PET I AGREE TO PAY THE ADDITIONAL CHARGE FOR MY PET TO BE TREATED

Customer Signature X \_\_\_\_\_ Date: \_\_\_\_\_

Grooming Instructions: