

*****Grooming Authorization and *****
Instructions

MUNFORD ANIMAL HOSPITAL, LLC
523 CORBITT DRIVE
MUNFORD TN 38058
901-837-0101

Instructions on how I would like my pet to be groomed. Please be very specific as to length of hair to be left on body, etc:

I understand that the price for the services provided by the groomer today will be _____ plus tax for **grooming services only**.

In some instances, after attempting to groom a pet, it becomes necessary to use sedation for the safety of the pet and the groomer. I, _____ **(owner/agent)** **give permission for a Veterinarian to sedate my pet for grooming today.** **(Cost of sedation is not included in the grooming price)**

- Yes, please contact me at _____ prior to sedation.
 No, it is not necessary to contact me prior to sedation.

Phone number(s) where I can be reached *on the day of grooming-*

Be sure to call before coming to pick up your pet to confirm that your pet's grooming has been completed. Pet's are usually ready after 2:00pm.

Authorized Signature of Owner/Agent:

Date

For office use only:

Called owner:

- spoke with _____ (owner/agent) at _____ (time)
 Called and LMOR
 Called with No Answer