



Rocky Hill  
Animal Hospital

(865)691-8826

# Patient Drop Off Form-Grooming 2019

Owners Name: \_\_\_\_\_ Pet's Name: \_\_\_\_\_

Best Phone # : \_\_\_\_\_ Alternative Phone # \_\_\_\_\_

Do you prefer text when services completed? YES \_\_\_ NO \_\_\_

Reason for Visit: Grooming + \_\_\_\_\_

**Our records indicate your pet is due for the following:**

\_\_\_\_\_ (\_\_\_\_\_) Initials for approval

or who to call for permission. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**OPTIONAL SERVICES**

- Nail Dremel \$9
- Teeth Brushing \$7
- Conditioner \$3-\$5
- Special Shampoo \$3-\$8
- Furminator
- Creative Color \$10+
- Pampered Pooch \$20

May we post your pet's photo on social media (ie Facebook, Instagram)? Yes \_\_\_ No \_\_\_

If necessary for grooming or medical care, do we have permission to sedate your pet?

Yes: \_\_\_ No: \_\_\_

Are there any problems your pet might have of which we should be aware?

To effectively diagnose and treat many conditions, diagnostics such as x-rays, blood work, and other procedures may need to be performed. We will notify you by phone, ask for your permission to treat, and provide an estimate before undertaking these diagnostics.

\*I also authorize RHAH to dispense Capstar—a safe, proven flea control medication for an additional \$7.35 (under 25lbs) or \$8.00 (over 25lbs) if any evidence of a flea infestation is noted on my animal.

\*\*I understand that late arrival fees will range from \$5 to \$15, and no-show fees will range from \$20 to \$35, depending on the breed and amount of time missed. I agree to pay these charges as assessed. For further details, please ask.

**I HEREBY AUTHORIZE ROCKY HILL ANIMAL HOSPITAL, ITS DOCTORS, AND STAFF TO GIVE STANDARD AND ACCEPTED TREATMENT NECESSARY FOR THE WELL BEING OF MY PET. I AGREE TO BE RESPONSIBLE FOR ANY AND ALL COSTS INCURRED IN CONNECTION WITH ANY TREATMENT DURING A GROOMING VISIT. I UNDERSTAND ONLY THE MINIMUM DIAGNOSTICS AND/OR TREATMENT WILL BE ADMINISTERED TO MY PET UNTIL I CAN BE CONTACTED FOR DIRECT AUTHORIZATION.**

Owner/ Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_