## Picasso Dog Groomery, LLC.

Dog Name	Breed		Dog Birthday	
Vet Office	Phone		Rabies Date	
Owner Name		Hm Phone _		
Address		Cell Phone .		
City, State, Zip		E-mail		
Emergency Contact		Phone	Phone	
Health or Behavioral Issues (circle all that apply)  Aggressive*** Eye Discharge Ear Infection Arthritic  Skin Problems Knee Surgery Blind Hot Spots  Separation Anxiety Dry Eyes Fleas Deaf  Liability Release  I am aware that my pet is my responsibility and that I am completely responsible for the actions of myself and my pet.  ***I understand that aggressive animals are not accepted for services provided by Picasso Dog Groomery, LLC (PDG, LLC)and any damages to facilities and equipment or injury to staff will be charged to owner/custodian of the pet.				
Signature		Date		
I release Picasso Dog Groomery, LLC and it's agents from any and all claims, damages and liability from my use of services provided by PDG, LLC.				
Signature		Date		
hair will be very close service. Also I read "I Special conditions/a	ged pets/owner-sedated pe	lease and payment	may be required prior to	
liver disorders to become	ome active and can result in ill ble care of your pet in the gro	lness, seizures, or th	•	
have your pet treated	ry or health concern, PDG, LL as necessary. All veterinarian curred at any veterinarian othe	n charges will be at t	the owner/custodian's	
Signature	С	Date		