



The Woof Tone Inn & Spa
1719 N Fitzhugh Ave
Dallas, TX 75204
469-620-1763

Grooming Consent & Release Form

Client Information:

Name: _____ Phone #: _____ Email: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Emergency Contact: _____ Phone #: _____

Person(s) authorized to pick up my pet: _____

How did you hear about us? _____

What is your preferred method of contact for appointment reminders?

Phone call _____ Text Message _____ Email _____

Pet Information:

Pet's Name: _____ DOB: ___/___/___ Breed: _____ Color: _____

Age: _____ Sex: _____ Weight: _____ Is your pet spayed/neutered? Y/N: _____

Does your pet have any history of aggression towards humans or other dogs? **If so, please explain:**

Does your pet have any known allergies, health issues or special needs? **If so, please explain:**

Is your pet on any medications? **If so, please explain:**

Can we give your pet treats? Yes or No

We require proof of the following vaccinations: Rabies, Distemper, Canine Influenza, and Bordetella (Kennel Cough)

Have you submitted a physical or digital copy of your pet's vaccines? Y/N

Services:

Full groom: includes bath, haircut, external anal gland expression, ear cleaning, and nail clipping _____

Bath _____ Ear Cleaning _____ AGE (external) _____ Teeth Brushing _____ Sanitary Trim _____

Other _____

Cut/Trim Instructions: _____



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Please review our policies and then sign/date at the bottom:

Terms & Conditions:

1. Risks and Disclaimers:

- I understand that grooming involves certain risks, including but not limited to skin irritation, minor injuries, or stress. The Woof Tone Inn & Spa will take all reasonable precautions to ensure my pet's safety and well-being. However, I acknowledge that unforeseen issues may arise, and I agree to hold The Woof Tone Inn & Spa harmless for any such occurrences. Initials: _____

2. Health and Vaccinations

- Owners must provide proof of vaccination before services are rendered.
- All pets must be up-to-date on vaccinations, including but not limited to Rabies, Distemper, Canine Influenza, and Bordetella (kennel cough).
- They must also present a negative fecal test within the last year.
- Pets should be free from any fleas, ticks, or contagious diseases or conditions. In the presence of any fleas or ticks, I understand that a flea/tick bath will be performed with an additional charge.
- Owners must notify Woof Tone Inn & Spa of any existing medical conditions or allergies. Initials: _____

3. Emergencies:

- In the event of an emergency, I authorize The Woof Tone Inn & Spa to immediately seek professional veterinary attention for my pet at my expense. I understand that all attempts will be made to contact me and the emergency contact(s) listed in the event of an emergency. Initials: _____

4. Coat Condition:

- I understand that The Woof Tone Inn & Spa puts my pet's comfort above all else. In the event that my pet's coat is matted, I understand that the groomer may have to shave the matts out rather than perform a potentially painful dematting procedure. I also understand that if my pet is severely matted, that there is an increased risk for clipper burn or cuts to occur. I understand that all attempts will be made to prevent this, however in many extreme matt conditions, it is unavoidable. I also understand the matted pets take additional time to groom so there will be an additional fee added onto the regular grooming price if my pet's coat is matted. Initials: _____

5. Health:

- I understand that grooming can potentially be a stressful process to some pets and I will inform the groomer if my pet has any heart conditions or stress related issues prior to grooming. I also understand that it is necessary to have my pet up to date on all vaccinations prior to every grooming. Initials: _____

6. Payment & Cancellation Policy:

- I understand that if I need to change my appointment time or cancel it, I must give at least 24 hours notice so that the appointment time can be made available to another client who is on the waiting list. If two appointments are missed without given notice, clients may then be required to pre-pay prior to scheduling any future appointments. Initials: _____

7. Consent:

I, _____, hereby consent to the grooming services outlined above for my pet, _____ . I acknowledge the potential risks involved and agree to release The Woof Tone Inn & Spa from any liability associated with the grooming process. Initials: _____



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8. Emergency Authorization:

- In the event of a medical emergency, I authorize The Woof Tone Inn & Spa to seek veterinary care or emergency medical attention for my pet if deemed necessary. Initials: _____

9. Media Release

- Woof Tone Inn & Spa may take photos or videos of pets for promotional or social media purposes.
- By signing this waiver, owners consent to their pet's image being used. Initials: _____

Agreement and Signature:

By signing below, I acknowledge that I have read, understood, and agree to the terms and conditions stated above. I voluntarily release Woof Tone Inn & Spa from any liability and agree to the policies for the care of my pet.

Client Signature: _____ Date: _____

Staff signature: _____ Date: _____

