2Urban Dogs

Pet's Name(s): _____

Date: _____

I hereby authorize this grooming establishment to obtain emergency veterinary treatment for my pet, if necessary, and understand that I am responsible for any associated costs.

Owner Name – please print: _____

Owner Signature: _____

GENERAL PET ~ RELEASE FORM

We care deeply about your pet's safety and well being and want to assure you that every effort will be made to make their visit as comfortable and pleasant as possible.

Occasionally, grooming may reveal a hidden medical issue or worsen as existing condition. This can happen during or after the grooming process. Customers must let us know within 24 hours of the groom if any irritation or other issues are noted or we cannot be held responsible for any necessary care.

In the best interest of your pet, we ask for your permission to seek immediate veterinary care if it becomes necessary.

Owner Initial: _____

CAGE DRYER ~ RELEASE FORM

The health, safety and comfort of your pet are very important to us. We believe in keeping you informed and involved in all aspects of your pet's care.

For some dogs, the use of a cage dryer is a safer and more comfortable drying method. If recommended for your dog, we will follow these safety protocols:

- Cage dryers must have working temperature gauges and timers.
- Only equipment specifically designed for cage drying will be used.
- Manufacturer instructions will be strictly followed.
- All pets in cage dryers will be properly monitored at all times.
- Owner consent is required before a cage dryer is used.

I hereby grant permission to this grooming establishment to use a cage dryer for the safe and comfortable drying of my dog.

Owner Initial: _____

Urban Dogs

SOCIAL MEDIA ~ RELEASE FORM

I hereby authorize the use of photos and/or information related to my pet's experience at this establishment. I understand my pet may appear in publications including (but not limited to) electronic, audiovisual and promotional materials, literature, advertising, community presentations, correspondence with legislators, media, and other similar uses.

My consent is given freely as a public service, and I understand that I will not receive payment for the use of this content.

I release this establishment and its employees, officers and agents from any and all liability that may arise from the use of such media, stories, promotional materials, written articles, videos and/or photographic images.

I hereby grant permission for this establishment to use:

- My pet's name(s) and/or images
- My pet's name(s) and my last name/images
- My pet's name(s) and my full name (first and last) / image

Owner Initial: _____

MATTED PET ~ RELEASE FORM

Because we care about your pet's safety and well-being, we want to assure you that every effort will be made to make your pet's visit as pleasant as possible.

If your pet is severely tangled or matted, there is a greater risk of injury, stress or trauma. While all precautions will be taken, problems may occasionally arise during or after grooming, such as nicks, clipper irritation or mental and physical stress.

In the best interest of your pet, we request your permission to obtain immediate veterinary treatment if necessary.

I hereby grant permission to this grooming establishment to obtain emergency veterinary treatment for my pet at my expense. I also understand that matted pets are at a higher risk of injury during grooming and agree not to hold this establishment responsible for any accident or injury to my pet.

Owner Initial: _____

Medical Release: To the best of my knowledge, I have provided complete and accurate information regarding my dog's known medical conditions to facilitate appropriate care, treatment, and consideration of any medical needs. Any issues must be brought to our attention within 24 hours of the appointment.

Owner Initial: _____