## LEDGEWOOD KENNEL LTD.

## **GROOMING**

How did you hear about us?_				
Pet/s Name:	Breed:	S	Sex:	
Owners Name:				
Address:	City:	State:	Zip:	
Phone-Home	Work:	Cell:		
Emergency Contact:	Phone-Home:	Work:	Cell:	
Vet:	Address:	Phone	Phone:	
Rabies Due Date:	Bordetella/Canine Cough Due Date:			
Special Instructions/ Medica	tions:			
Ledgewood Kennel LTD to of their judgment to do anything precautions in clipping the al	( name ) may be may be may generate any unnecessary hair. I am generate any for the health of my proposed described dog, but I am aware cked in the grooming process.	permitting Ledgewood et. Ledgewood Kennel	d Kennel LTD to use LTD will use all	
* I agree not to hold Ledgew grooming.	ood Kennel LTD responsible for a	ny injury incurred as a	a result of this	
* If an animal becomes sick, administer it, and the owner	while at the kennel, and needs vet will be liable for all costs.	erinary attention, an a	vailable vet will	
images or likeness of his or h	edgewood Kennel and its employener pet taken while the pet is at Leonarketing, advertising, illustration,	dgewood Kennel, in ar	ny format/and use for	
Yes, I do give pern	nission for you to use my pet/pets	photographs.		
No, I do not give p	permission for you to use my pet/pe	ets photographs.		
Owners Signature		Date:		