



Grooming Admission Form

Do not write in box!

Client/Patient Label Only

Document Name: Client/Patient Info Label.
Shouldn't be filed if no label is present.

Arriving Date: _____ Leaving Date: _____

Wellness Services To Be Done:

| | | | | |
|-----------|---------|-------|-----------------|------------|
| Exam | HW Test | Fecal | Rabies | Bordetella |
| Distemper | Parvo | Lepto | CIV (Bi-valent) | |

Client Initials for the items above: _____

Please Initial

_____ Pets must be up to date on all vaccinations. Proof of vaccinations must be on file at the time of boarding, or they will be administered upon admission.

_____ I acknowledge that VCA Spring strives to operate a flea free facility. In order to maintain this standard, a Capstar pill will be given if any fleas are found on your pet.

_____ I acknowledge VCA Spring's bath recommendation. If your pet will be boarding with us 5 nights or longer, we recommend that he/she have a clean up bath before leaving.

_____ I acknowledge that it is hospital policy that all personal belongings must be taken home. This includes collars, leashes, toys and bedding. VCA Spring is NOT responsible if any items are lost or damaged if left with us.

Grooming Services to Be Performed

Groomer's Bath - Includes nail trim, cleaning ears and expressing anal glands.

3 Piece Groom - All above plus trimming hair around feet & pads, face and around sanitary (private) areas trim.

Groom - Includes everything above with an all-over haircut. Please include detailed instructions if needed:

Add-ons (No-charge): De-shedding Bows Bandannas

Add-ons (\$5.00/service): Paint Nails Brush Teeth File Nails

Emergency Contact Information

Phone: _____ Email: _____

Signature of Owner/Agent

Date

VCA Spring Animal Hospital

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AT VCA ANIMAL HOSPITALS, WE CARE