

My Two Dogs, Inc.



GROOMING REGISTRATION

CLIENT INFORMATION

Last Name		First Name		
Street Address		City	State	Zip Code
Email Address		How did you hear about us? (Walk by, Urbanhound, Friend, Citysearch, etc.)		
Home Phone No.	Cell Phone		Alternate Phone No.	
Emergency Contact (Name)			Phone Number	

PAYMENT INFORMATION

Circle One: VISA MC AMEX DISCOVER	Card Number	Expiration
Name on Card	Billing Address (if different from the above address provided)	

Cancellation policy: Please give My Two Dogs 24 hours advance notice if you are unable to keep your appt. If you do not call or show, we will charge your card a \$20 cancellation fee. Credit Cards are required to make an appt.

DOG INFORMATION

Dog's Name		Breed		Color(s)	
Circle One: MALE FEMALE	Is your dog spayed/neutered? YES NO		Birthdate	Age	Weight
Veterinarian/Clinic Name		Address		Phone No.	
Describe any pre-existing medical conditions (use back of page if necessary)					

*We require a copy of your dog's vaccination records for Rabies and DHPP. Your dog must be up to date for both vaccinations or your appointment will be rescheduled and a \$20 fee will be charged.