



Grooming Admission Form

Please call ZimmVet at 763-856-4848 to schedule your dog's groom. This form, along with the pet's medical records if not a ZimmVet patient must be received **72 hours** prior to the reservation.

Owner Information	
Primary Owner First Name	Primary Owner Last Name
Primary Owner Email Address	Primary Owner Home Phone Number
Primary Owner Cell Phone Number	
Secondary Owner First Name	Secondary Owner Last Name
Secondary Owner Email Address	Secondary Owner Cell Phone Number
Emergency Contact Name (If Owner Unreachable)	Emergency Contact Phone
Name of Veterinary Practice	Home Address

Pet Information				
Pet Name	Pet Birth Date			
Pet Gender (circle one)	Intact Male	Intact Female	Neutered Male	Spayed Female
Pet Breed	Pet Weight			

Grooming Information

Medical Information
Current Vaccines - Please call your veterinarian to fax or email vaccine records to 763-856-2474 or info@zimmvet.com <ul style="list-style-type: none"><input type="radio"/> Rabies<input type="radio"/> Distemper<input type="radio"/> Bordetella<input type="radio"/> Influenza (Bivalent)
If your pet requires medical services, a separate appointment will need to be made in advance with ZimmVet
Flea Preventative Product Used: Date Last Given:
Please list any allergies that your dog may have:

In the event that my pet requires emergency medical attention while being groomed by Jasmine Johnson and I CANNOT be reached by phone, I authorize ZimmVet to proceed with all recommended procedures up to

\$_____.

If I enter \$0, I understand that staff will stabilize my pet, but not administer any veterinary care if I cannot be reached.

Initial	Recognition of Policies
	I understand that I am 100% responsible for any veterinary bills or other expenses otherwise incurred on my pet's behalf. I understand that I will be charged for my pet's grooming (including extras) and it is due at or prior to the reservation.
	I hold Jasmine Johnson and ZimmVet harmless for any loss, liability, claims, expenses, and entitlements of any kind including, without limitation to injury, sickness or damage that my pet may suffer during or after participating in ZimmVet programs.
	I understand that on occasion my pet's likeness may be captured on video or other media while at ZimmVet. I hereby authorize ZimmVet to use, broadcast and or reproduce our (myself and my pet) likeness in video, print or other media. I agree that I will not be compensated for any such use.
	I understand that due to risk in the Zimmerman area, it is recommended that my pet is vaccinated for Lyme disease and Leptospirosis for my pet's protection. It is required that my pet is vaccinated for Rabies, Distemper Combination, Bordetella, and Bivalent Influenza. I agree to keep my pet current on flea and tick preventative and a monthly dewormer to prevent both internal and external parasites.
	I understand my dog is at a higher risk for illness being around other dogs in the kennel room and that ZimmVet is not responsible for any illness that my pet may contract while in the grooming facility. I agree that my pet will be symptom and treatment free from any sickness within 48 hours of my check in appointment. If my pet is unstable or symptomatic upon arrival, ZimmVet may decline to admit the pet for grooming. I understand that if my pet is showing symptoms of any contagion, I am responsible for arranging for them to be picked up immediately upon communication from a ZimmVet staff member.
	I agree to arrive at my scheduled appointment time and understand that check in and checkout appointments may take up to ten minutes. I understand that if I do not arrive at my scheduled time, staff may not be available to assist me immediately.
	I acknowledge the Cancellation Policy and understand that I am required to give 72 hour notice of cancel or rescheduling.

Owner Signature: _____ Date: _____ *This client signature is valid through 2023

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