

COLONIAL K-9 LLC

30 Big Spring Lane

Stafford, VA 22554

540-657-4597 fax 540-657-4598

Grooming Waiver & Behavior Fact Sheet

Owner's Name: _____ Email: _____

Address: _____

Home#: _____ Cell#: _____ Work #: _____

Dog's Name: _____ Veterinarian: _____

Breed: _____ Color: _____ DOB: _____

Vaccine Expiration Date: Rabies: _____ Bordatella: _____ DHPP: _____

Please briefly explain your dogs usual behavior for grooming services:

RELEASE OF LIABILITY

_____ (please print name) agrees to release indemnity and hold harmless Colonial K-9 LLC and its agents from any and all injuries to the dog or owner due to participation in the above listed services . The owner will be responsible for all veterinary/ medical bills incurred. The owner is responsible for any harm caused by your dog while in the care of Colonial K-9 LLC.

Signature: _____

Date: _____