

Declaration & Consent by Owner

(or Responsible Person)

THE WOOF WAGON



Owner/Responsible Person

Name: Email:

Address: Postcode:

Mobile: Home Phone:

PET

Pet's Name: Breed:

Colour/Distinguishing Marks:

Sex M / F Neutered Microchipped Name Tagged

HEALTH & MED

Vet Surgery & Name: Tel No:

Yearly Vaccinations Completed: Y / N Allergies:

Old Injuries:

Other known or diagnosed conditions:

Current Meds/Treatment:

TEMPERAMENT/BEHAVIOUR/SOCIALISATION: Known Fears & Anxieties

Vet Vacuum/Hair Dryer Loud Noise Water/Bathing Restraint

Other:.....

Aggression: Dog-Dog Dog-Human Dog-Other

Circumstances:.....

Has this dog ever bitten? Y / N Circumstances:

GROOMING FOR LIFESTYLE & HABITS

Coat Management Regime: Combing Bathing Drying Frequency: Daily/Weekly/Monthly

MATT PREVENTION: Debris Removal Detangling/Demattng Drying/Brushing

Recommended schedule: Full Groom everweeks Maintenance groom everyweeks

Reminder frequency every weeks Method: email/text/phone

- I accept that The Woof Wagon will provide a service in compliance with The Animal Welfare Act (2007).
- In the event it is deemed necessary, I consent to humane matting release.
- In the event of medical emergency arising during grooming, I consent to emergency veterinary treatment.
- In the event veterinary advice is deemed necessary, I agree to initiate this within 24 hours of my dog's groom.
- I agree to the Terms and Conditions as set out in attached, I note that these may change from time to time and that it is my responsibility to keep abreast of such changes.
- I give consent for The Woof Wagon to take photo's of my dog for use on the website, social media and other printed material