New Client Intake & Liability Waiver

The Clipper Co.
Mobile Dog and Equine Grooming
617-304-1876

Client Information

- Full Name: _____
- Address: _____
- City/State/ZIP: _____
- Phone: _____ Email: _____

Pet Information

- Pet Name: _____ Species/Breed: _____
- Weight: __ lbs Age: __ years Gender: ☐ M ☐ F (spayed/neutered: ☐ Y ☐ N

- Notes (Past injuries/illness, Behavioral issues, etc)_____
  _____
  _____

Veterinary Information

- Vet Name/Clinic: _____
- Vet Phone: _____

Release of Liability

I, the undersigned, am the legal owner or authorized agent of the pet described above. I acknowledge that grooming can involve inherent risks, including but not limited to quicking nails, skin irritation, clipper burns, allergic reactions, stress, or accidental injury. I hereby release **The Clipper Company LLC**, its owner(s), employees, and representatives from any and all liability for injury, illness, or damage that may occur to my pet before, during, or after grooming, **unless caused by proven negligence**.

Cancellation Policy

I confirm that I have read, understand, and agree to the cancellation policy of The Clipper Company LLC, as presented at booking:

- **≥48 hours notice:** no fee

- **<48 hours notice:** 50% service fee
- **Same-day cancel or no-show:** 100% service fee

Additional Terms

- I certify that my pet is **up to date on vaccinations** (including Rabies).
- I have disclosed any known aggression, health issues, or sensitivities.
- I grant permission for emergency veterinary treatment at my expense if necessary, should The Clipper Company LLC be unable to reach me.
- I understand and agree that this waiver is valid for all future grooming appointments with The Clipper Company LLC, unless otherwise revoked in writing.

Signatures

Owner/Agent Name (Printed): _____
Signature: _____ **Date:** _____

Witness/Groomer Name: _____
Signature: _____ **Date:** _____