**California Cat Center**

**Grooming**

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| Client Information:  Name: Click here to enter text.  Address: Click here to enter text.  Click here to enter text.  Home phone: Click here to enter text.  Work phone: Click here to enter text. | Cell phone: Click here to enter text.  Emergency contact name:  Click here to enter text.  Emergency contact number:  Click here to enter text.  E-mail: Click here to enter text.  Would you like to receive our Monthly newsletter? Choose an item.  E-mail: Click here to enter text. | |
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| Name: Click here to enter text. | Name: Click here to enter text. |
| Age: Click here to enter text. | Age: Click here to enter text. |
| Color: Click here to enter text. | Color: Click here to enter text. |
| Breed: Click here to enter text. | Breed: Click here to enter text. |
| Long or short hair? Choose an item. | Long or short hair? Choose an item. |
| Sex: Choose an item. | Sex: Choose an item. |
| Spayed or neutered? Choose an item. | Spayed or neutered? Choose an item. |
| Veterinarian (name & number): Click here to enter text. | Veterinarian (name & number): Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Rabies VAC EXP: Click here to enter text. | Rabies VAC EXP: Click here to enter text. |
| Last Flea Prevention: Click here to enter text. | Last Flea Prevention: Click here to enter text. |

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| Questionnaire:  Has your cat been groomed before? Choose an item.  If Yes, how did they do?  Click here to enter text.  Does your cat have any mattes? Choose an item.  Note: Matted cats take longer to groom.  Do you suspect your cat may have fleas? Choose an item. | Does your cat have sensitive skin or allergies?  Click here to enter text.  Does your cat have a medical condition that needs to be monitored during the grooming processes? Click here to enter text.  Click here to enter text.  Does your cat have any lesion or open wounds? Choose an item.  If yes describe: Click here to enter text.  Additional Notes: Click here to enter text. |