

JCVC Spa Menu

JOHNS CREE	Pet's Name:	Client Name:				
— CLINIC —	Best Contact Number(s):			Pick up time:		
		ving spa choices: (please mark 1 of 3 cl				
* * * * * * * * * * * * * * * * * * *	Full Groom (haircut) Mini Groom (face, feet & tail) Coat/Breed appropriate Shampoo Brush out & blow cry Coat/Breed specific haircut, unless otherwise detailed below. Nail Trim Anal gland expression Ear cleaning Bandana & cologne	 ✓ The Works" Bath ✓ Deoderizing Shampoo or as detailed below ✓ Nail Trim ✓ Ear Cleaning ✓ External anal gland expression ✓ Brush out & blow dry ✓ Bandana & cologne * If your pet is matted, may we suggest getting your pet groomed * 	low lon	Deodorizing sho detailed below. Towel Dry is bath is meant for br maintenance coats. I g hair that requires br atting, may we sugge either a "The Works" professional groom	reeds with short If your pet has ushing and/or st upgrading to	
™ M	Love my pet, hate the selection Please brush my pet's My pet needs a medical Use the new blueberry and removes discolorate.	rvices: (please mark as many as y **Additional Charges shedding! Please perform a desh teeth. ated shampoo or has skin issues: facial shampoo on my pet. It is settion from light colored coats. have their manicure & pedicure do	edding —— oothir	g treatment		
	My pet has the following "Special Needs":					
K E J J On	CVC policy: For the safety of your peraccinations, fecal and flea preventativelow you agree to either a) have JCV hours of dropping off at JCVC. 19 requirements: Rabies, Distemper, eline requirements: Rabies, Distemper, CVC is a flea free environment. All perot been given within the past month owner's expense.	et and the pets that are on the premises, we reque. If our records show that your pet is due for an C proceed with updating all requirements or b) y Bordetella (in the past 6 months) and fecal within per, Leukemia or proof of negative combo test & ts must be on a veterinary prescribed flea/tick provided the combo test with	ire any py of the lou will pronted the year fecal /de evention apstar or	pet staying with us to below requirements rovide us with proof ear. Eworming within the case where	to be current on s, in signing f of such within year.	
	l applied	me of flea/tick prevention	on _	/	_	
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			_		_	
	Owner or authorize	d agent	_	Date	NewSpaMenu102.cdr	