

GROOMING CHECK SHEET

Dogs Name _____

Owners Name _____

Phone Number (_____) _____ Date to be groomed _____

Cut Description: _____

Hair length to be left on dog: Shave (none)____, 1/2"____, 1"____, 1&1/2"____, 2"____

Leave hair longer longer on ,____ tail,____ ears,____ legs____

Trim nails____, Grind Nails____

Bath & Brush out _____

Trim Feathers,____, Legnth_____”

Special Shampoo _____

Any Moles _____, Where _____

Special Instructions

