

Top Paw Grooming Spa will use all reasonable care and precautions to prevent injury, escape, or death of my pet. In the event my pet becomes ill, is hurt, or any other emergency arises, **Top Paw has my permission to act in a manner deemed best by Top Paw Staff.** This may include taking my pet to my veterinarian or any other veterinarian if I cannot be contacted in a timely manner.

Top Paw has my permission to provide care through their **Emergency Vets:**

Companion Animal Clinic

Dr. Anthony Haban

515-233-6689

143 Dunn St. Gilbert, IA 50105

Iowa State Small Animal Hospital

24hr Emergency Services

515-294-4900

1809 S Riverside Dr. Ames, IA 50010

I agree to accept responsibility for all costs for any treatment administered.

Top Paw will not be held legally or financially responsible for:

- Injuries deemed self-inflict by my pet during grooming/daycare services
- Skin irritation, clipper burn, or minor nicks, etc. resulting from grooming
- Sickness or injury due to pre-existing or undiagnosed medical conditions
- Events beyond control including fire, flood, storms, etc.

I agree to notify Top Paw **within 48 hours** of the time my pet leaves their care of any claim I may allege **regarding compensation for medical attention deemed necessary by a vet** resulting from alleged injuries on the part of Top Paw.

In the event Top Paw disputes my claim, they have consent to consult with the veterinarian to determine extent of liability if any.

I understand I am responsible for all additional fees charged to my account due to services deemed necessary beyond normal grooming procedures, as outlined in the Client Contract. I understand and agree that Top Paw has the right to refuse service to me and any other customer for any reason.

I am the owner, or the appointed agent of the pet named, and I have read and hereby agree to all the terms and conditions outlined in the preceding Owner/Agent Release.

Print Name: _____ **Signature:** _____

Address: _____

Phone Number: _____ **Date:** _____