
CARE TO SHARE FORM

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Pet's Name (s): _____

When you refer a friend and your friend becomes a client, we will send you a coupon for your choice of one Pet Odor Product or a bottle of our Douxo Maintenance Shampoo. The more clients you refer, the more coupons you will receive. Just fill out the information above and have your friend bring this form with to their first appointment.