**Veterinary Release Form**

Doggone Fun LLC  requires all clients to complete a Veterinary Release Form. In the event of an emergency, Doggone Fun LLC will make every attempt to contact the owner, the secondary owner and the emergency contact. In the event that no contact can be reached, Doggone Fun LLC will seek appropriate medical care for your pet(s). Doggone Fun LLC will make every attempt to take your pet(s) to the Veterinarian listed below, however, if your Veterinarian is not available, Doggone Fun LLC will bring your pet(s) to an appropriate clinic.

Veterinarian Name: Office Phone:

Veterinarian Address:

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_agree to the following:

1. In the case of an emergency, I understand that Doggone Fun LLC will make every attempt to contact the primary owner, secondary owner and emergency contact.

2. If no contact can be reached, I authorize Doggone Fun LLC to seek appropriate medical treatment for my pet(s).

3. I understand that every effort will be made to take my pet(s) to the above Veterinarian, however, I authorize Doggone Fun LLC to seek treatment for my pet(s) any appropriate clinic, if necessary.

4. I give permission to Doggone Fun LLC to approve treatment up to:

* No limit
* $250
* $500
* $1000
* other $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. I authorize Doggone Fun LLC and the Veterinarian caring for my pet(s) to share all medical records of my pet(s) with emergency vet clinics in an effort to provide the best care possible.

6. I agree to assume full responsibility for payment and reimbursement for any and all veterinary services rendered.

7. I understand that Doggone Fun LLC assumes no responsibility for the loss or injury of any pet(s) and is released from all liability related to transportation, treatment and expenses.

8. This agreement is valid from the date below and grants permission for all future veterinary care without additional authorization each time Doggone Fun LLC cares for my pet(s).

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printed name signature

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date