



BULetproof Balanced K9

425-466-6386

BULetproofbalancedK9@gmail.com

## Veterinary Release Form

Owner's Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

This pet will be enrolled and participating in the BULetproof Balanced K9 Dog Training program. We do require approval from their veterinarian that this pet is up to date on recommended vaccinations, and has no known health conditions that could potentially harm this pet.

**We do require proof of Rabies vaccination.**

Name of Veterinary Hospital: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Veterinarian (printed): \_\_\_\_\_

Veterinarian's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Thank you for helping us guarantee to bring out the best in our canines! We strive to create overall balance, communication, and trust of the overall mind and body! BULetproof Balanced K9 Training continues to educate all of our clients about keeping the highest quality standards both behaviorally and medically. If you have any recommendations, suggestions, or concerns, please do not hesitate to contact us at (425) 466-6386. We are here to work side by side with your medical team to obtain the most successful outcome for each one of our pups!

**Please e-mail this form, once filled out, to [BULetproofbalancedK9@gmail.com](mailto:BULetproofbalancedK9@gmail.com)**