

Wag Wagon Pet Services

Veterinarian Release Form

In the event that any of my pets appears to be ill, injured, or at significant risk of experiencing a medical problem at the start of service or while under the care of Wag Wagon Pet Services, I give permission to Wag Wagon Pet Services to seek veterinary service from a veterinarian or an emergency veterinary clinic. My preferred veterinary services are listed on the Wag Wagon Pet Services Contract. Other veterinarians or emergency care clinics chosen by Wag Wagon Pet Services are acceptable.

I understand that all reasonable efforts will be made to contact me regarding any treatments, illness, injury, or potential problems as soon as the condition is deemed not life threatening and/or contact is possible. I understand that Wag Wagon Pet Services works diligently to prevent accidents and injuries, and that such problems may occur no matter how well a pet is cared for. I agree to allow Wag Wagon Pet Services to use their best judgment in handling these situations, and I understand that Wag Wagon Pet Services assumes no responsibility for the actions and decisions of the veterinary staff, the health, or death of my pet(s).

I will assume full responsibility for the payment and/or reimbursement for any and all veterinary services rendered, including but not limited to diagnosis, treatment, medical supplies, and boarding. Such payments will be made within 14 days of the initial incident. I also agree to be responsible for all Special Service fees assessed by Wag Wagon Pet Services for emergency transportation, care, supervision, or hiring of emergency caregivers, and will pay such fees within 14 days of each incident.

I further authorize Wag Wagon Pet Services and my primary veterinarian(s) to share all of the medical records of all of my animals with veterinary clinics in an emergency in the interest of providing the best care for my ill or injured animal(s).

Every dog and cat at the site of service will be current on its rabies vaccinations prior to services being rendered; proof of vaccination to be supplied at the Meet and Greet Consultation. I will also make arrangements to guarantee that each animal will remain current on its rabies vaccinations throughout each service visit period.

I agree to notify Wag Wagon Pet Services of any signs of injury or possible illness before any visit as soon as the condition appears. Wag Wagon Pet Services reserves the right to cancel service at any location where a pet with a potentially infectious condition exists. Wag Wagon Pet Services strives to provide clean, safe service to each of our clients. In doing so, Wag Wagon Pet Services strongly recommends that each pet be vaccinated, dewormed, and protected from harmful insects according to veterinarian recommended standards.

This agreement is valid from the date below and grants permission for future veterinary care without the need for additional authorization each time Wag Wagon Pet Services cares for one or more of my pets. I understand that this agreement applies to all of the pets within Wag Wagon Pet Services care. In signing this contract, I agree that I have the sole authority to make health, medical, and financial decisions regarding the animals that will be scheduled to receive service.

Client/Owner Signature: _____ Date: _____