

Standard Consent Form

Owner(s) Name: _____ Date: _____

Phone: _____ Day: _____ Night: _____

Email: _____

Pets Name: _____

Breed: _____ Sex: _____

Check: Canine _____ Feline _____

Consent

I am the owner of the above described pet and have the authority to execute this consent.

I hereby consent and authorize the performance of the following procedures and/or operation(s):

I also authorize the use of such anesthetics as you deem advisable and performance of such surgical or therapeutic procedures as you determine to be indicated, including medically necessary dental extractions. I further agree to be liable for any and all charges incurred during the performance of the foregoing procedure(s) or operation(s), including a required annual Bordetella vaccine, and I understand that the bill is due and payable upon discharge. I have been advised as to the nature of the procedure(s) or operation(s) and the risk involved, including unexpected death. I realize that results cannot be guaranteed.

Current Medications/Other:

I have read and understand this authorization and consent.

Owner/Agent: _____ Date: _____