Vet Release Form

Please ensure your veterinary surgery is made aware of this arrangement beforehand. Please fill out one release form for each cat.

Veterinarian Information:	Address:
Your Name:	
Pet's Name:	
Phone:	

Pet Information:
Animal Type:
Name:
Birth date:
Insurance Policy:

Known Medical Conditions:

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During my absence, …… (Cat sitters name) will be caring for my pet(s). In the event of an emergency, I authorise you (veterinarian) to administer medical treatment and will be responsible for payment to you (veterinarian) upon my return.

I, …… , give …… (Cat sitters name) permission to transport my pet(s) to the above veterinarian and authorize treatment in the event of an emergency or sickness.

If this veterinarian is not available, I authorise …… (Cat sitters name) to transport my pet(s) to a veterinarian of choice and authorize treatment. If emergency care is needed after regular office hours, my pet(s) may be taken to the nearest Veterinarian Emergency Clinic/Hospital.

I give permission to …… (Cat sitters name) to approve treatment up to £_____ (input maximum £ amount or "no limit"). I agree to be responsible for all charges upon my return including, but not limited to, vet fees, extra visit fees and transportation fees.

I agree to authorise veterinarian to euthanize my pet in extreme circumstances after all reasonable attempts have been made to reach me or my emergency contact.

In the event of my pet's death, I would like the pet cremated / kept at vet / other: _____.

I agree that …… (Cat sitters name) is released from all liability related to transportation to and from veterinarian and treatment for sickness or emergency.

This release will remain valid for all current and future visits unless a new release is signed.

Owner's Signature: Date:

…… ……