



## Veterinary Release Agreement

In the event that any of my pets or large animals appears to be ill, injured, or at significant risk of experiencing a medical problem at the start of service or while in the care of Alexandra Walden of Skyline Pet Care, I give her permission to seek veterinary service from a veterinarian or a veterinary clinic. My preferred veterinary services are listed on Skyline Pet Care's Pet Information Intake Form. Other vet care clinics chosen by the pet sitter are acceptable.

I ask Alexandra Walden to inform the attending clinic or veterinarian of my treatment limit of \$\_\_\_\_\_ per pet / all pets (most common values are \$200, \$1000, or unlimited). I understand that 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 it is Alexandra Walden's first priority to prevent accidents and injuries, and that such problems may occur no matter how well a pet is cared for. I agree to allow Alexandra Walden to use her best judgment in handling these situations, and I understand that Alexandra Walden 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 rendered, including but not limited to diagnosis, treatment, grooming, 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 Services fees assessed by Alexandra Walden for emergency transportation, care, supervision, or hiring of emergency caregivers, and will pay such fees within 14 days of each incident.

I further authorize Alexandra Walden 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, cat, and horse at the site of service will be current (per my veterinarian's recommendations) on its rabies vaccinations prior to the arrival of any caregiver. I will also make arrangements to guarantee that each animal will remain current on its rabies vaccinations throughout each service.

I agree to notify Alexandra Walden of any signs of injury or possible illness before any visit as soon as the condition appears. Alexandra Walden reserves the right to cancel service at any location where a pet with a potentially infectious condition exists. Alexandra Walden strives to provide clean and safe service to each of her clients. In doing so, she strongly recommends that each pet and large animal be vaccinated, dewormed, and protected.

This agreement is valid from the date below and grants permission for future veterinary care without the need for additional authorization each time Alexandra Walden cares for one of my pets. I understand this agreement applies to all of the pets and large animals within Alexandra Walden's 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.

Owner Name:  
Date:\_\_\_\_\_

Owner Signature:\_\_\_\_\_