

Call Louise Wilkes on
07761 826 736



Visit my website at
www.hands4hounds.co.uk

Veterinary Consent Form

Owner's Details:

Name.....

Address.....

.....

Postcode..... Tel:.....

Dog's Details

Name..... Breed.....

Colour..... Sex.....

DoB/Age..... Weight.....

I declare that I am the owner of the dog named above and that all the information on this form is correct. I am happy for my veterinary surgeon to disclose the required information about my dog.

I have read and accept the terms and conditions.

Signature..... **Date**.....

This section to be completed by the Veterinary Surgeon

Veterinary Surgeon.....

Practice Stamp

Practice Address.....

.....

.....

Tel:.....

Summary of the dog's injury or condition, areas of caution, comments, etc.

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Medication Details.....

I give my consent for the above named dog to receive remedial massage therapy.

Signature: **Date**.....



Terms and Conditions

1. Dogs will not be treated without the consent of their Veterinary Surgeon.
2. Whilst every care is taken of the dog undergoing treatment, it is done so entirely at their owner's risk.
3. Dogs with infectious or contagious conditions will not be treated.
4. Owners are required to inform the Therapist if, during a course of treatments, the dog's injury or condition worsens, or if the Veterinary Surgeon advises that treatment is stopped or suspended.
5. The Therapist reserves the right to refuse treatment to any dog.
6. Owners are requested to provide adequate restraint apparatus and to be present at all times during the dog's treatment session.
7. The Therapist reserves the right to use video footage and photographic stills taken during treatment sessions.
8. The Therapist does not take any responsibility whatsoever for any accident/injury sustained by the dog's handler whilst the animal is undergoing massage treatment.
9. The therapist is required to have adequate public liability and malpractice insurance cover before commencing any treatments.