



In Case of Emergency

Veterinary Release

VETERINARIAN

Hospital/Vet Name: _____

Address: _____

Phone: _____

To the Hospital:

MaryAnn Crawley (aka the Crazy Cat Nanny) has been contracted to care for my pet(s) and has my permission to place them in your care in the event of an emergency. Ms. Crawley will attempt to contact me as soon as medical care is deemed necessary. However, in the event I cannot be reached immediately, I authorize you to treat my pet(s) and I will be responsible for payment of any fees.

Pet Owner: _____

Pet(s): _____

Address: _____

Phone: _____

My pet(s) has/have the following health issues: _____

1. If above named veterinarian is not available, I agree that another vet in his/her practice may care for my pets.
2. I understand that Ms. Crawley assumes no responsibility for the loss of any pet and is released from all liability related to treatment.
3. Other conditions, if any: _____

This consent for treatment has no expiration date and grants permission for future veterinary care without the need for additional authorization each time Crazy Cat Nanny cares for one or more of my pets unless otherwise noted.

The Client states that they have read this agreement in its entirety and fully understands and accepts its terms and conditions.

Client/Pet Owner Name: _____

Signature: _____

Date: _____

