



Woodside Dog Walks



Woodside Cottage, 37 East Main Street, Blackburn, West Lothian, EH47 7QR

www.woodsidedogwalks.co.uk 07910719557

Veterinary Release Form

Owners Name: _____

Address: _____

Contact Number: _____

Mobile Number: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Dogs Name: _____

Description: _____

Age: _____

Medical Conditions: _____

Medications: _____



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If the dog named above becomes ill or injured I request Woodside Dog walks (Gemma Margaret Duncan & Margaret Sarah Duncan) take the dog to:

Veterinary Office Name: _____

Veterinary Address: _____

Contact Number: _____

Alternative Veterinary Office Name: _____

Veterinary Address: _____

Contact Number: _____

If neither of the veterinary offices named above is available, I authorise Woodside Dog Walks (G.M.D & M.S.D) to take my dog to another veterinary office for treatment. I understand that Woodside Dog Walks cannot be held responsible for the results of the veterinary treatment or the loss of my dog.



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TO WHOM IT MAY CONCERN

I hereby authorise the attending veterinarian to treat my dog (named above) and I accept full responsibility for all fees and charges incurred in the treatment of my dog.

Woodside dog walks (G.M.D & M.S.D) are authorised to transport my dog to and from the veterinary clinic for treatment or to request "on-site" treatment if deemed necessary. If I cannot be reached in case of an emergency, the walker (G.M.D or M.S.D) shall act on my behalf to authorise any treatment excluding euthanasia.

I give permission to approve treatment up to £_____

I will assume full responsibility upon my return for payment and/or reimbursement for veterinary services rendered up to the above stated amount.

This agreement is valid starting on the date below whenever Woodside Dog Walks (G.M.D or M.S.D) cares for my Dog.

Owners Name: _____

Owners Signature: _____

Date: _____

Woodside Dog Walks Name: _____

Woodside Dog Walks Signature: _____

Date: _____



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End of Contract

I hereby end the authorisation given above to Woodside Dog walks (G.M.D & M.S.D).

Owners Signature: _____

Date: _____

Woodside Dog Walks Signature: _____

Date: _____