



**All
Creatures
Small**
ANIMAL HOSPITAL

Release Form

I, understand, the owner/authorized agent of _____.(pet's name)

Hereby waive the following procedure(s): _____

The risks and potential complications to my pet that may arise due to declining this/these procedure(s) have been fully explained to me. I assume full responsibility in the event that these complications occur. I further understand that there are inherent risks with all medications and anesthetics.

Signature: _____ Date: _____