



Medical Release Form

The safety and well-being of your pet(s) is our highest priority and we take the responsibility of caring for your pet very seriously. In the event a medical emergency arises while a pet is at our facility or participating in a service we provide, we will immediately get them medical treatment. Your pet may be taken to the nearest facility or a mobile vet will be called. We will make every effort to notify you immediately. Providing us with a local contact in the event you cannot be reached is very important so we can communicate promptly.

It is required that every pet parent understand and sign this form:

I understand that in an event deemed a medical emergency that Frisky Dog, at its sole discretion, may immediately engage a licensed veterinarian to care for your pet. I authorize Frisky Dog to seek medical attention at the closest available veterinary facility or mobile veterinarian. I further agree that I am financially responsible for any medical treatment my pet(s) receives because of a medical emergency.

Signature of Owner _____ Date _____

Printed Name _____