



Veterinary Release Agreement

In the event that any of my pets appear to be ill, injured or at significant risk of experiencing a medical problem at the start of service or while in the care of Pawfect Love Pet Care, LLC, its employees, agents and representatives (hereinafter, "Pawfect Love Pet Care"), I ("Client") give permission to Pawfect Love Pet Care to seek veterinary care from a veterinarian or veterinary clinic. My preferred veterinary services are listed on my "Pet Guardianship Form", executed contemporaneously herewith. Other veterinarians or emergency care clinics chosen by Pawfect Love Pet Care are acceptable.

I ask Pawfect Love Pet Care to inform the attending clinic or veterinarian of my requested total diagnosis and treatment limit of \$ _____ per pet/all pets (most common values are \$200, \$1000 or unlimited). I understand that efforts will be made to contact me regarding any treatments, illness, injury or potential problems as soon as the condition is deemed not life threatening and/or contact is possible. I understand that Pawfect Love Pet Care works hard to prevent accidents and injuries, and that such problems may occur no matter how well a pet is cared for. I agree to allow Pawfect Love Pet Care to use its best judgment in handling these situations, and I understand that Pawfect Love Pet Care assumes no responsibility for the actions and decisions of the veterinary staff, the health or death of my pet(s). I hereby waive and relinquish any and all claims against Pawfect Love Pet Care arising as a result of any veterinary care provided to my pet(s) pursuant to this Veterinary Release Agreement.

I will assume full responsibility for the payment and or reimbursement for any and all veterinary services rendered, including but not limited to diagnosis, treatment, grooming, medical supplies, and boarding. Such payments will be made within 14 days of the initial incident. I also agree to be responsible for all other service fees reasonably assessed by Pawfect Love Pet Care for all emergency transportation, care, supervision, or hiring of emergency caregivers, and will pay such fees within 14 days of each incident. I further authorize Pawfect Love Pet Care, and my primary veterinarian(s) to share all of my medical records of all of my animals with the treating veterinary clinic in an emergency in the interest of providing the best care for my ill or injured animal(s).

Every dog, cat or other household pet, at the site of service will be current (per my veterinarian's recommendations) on its rabies vaccine prior to the arrival of any Pawfect Love Pet Care caregiver. I will also make arrangements to guarantee that each animal will remain current on its rabies vaccinations throughout each service visit period.

I agree to notify Pawfect Love Pet Care of any signs or injury or possible illness before any visit as soon as the condition appears. Pawfect Love Pet care reserves the right to cancel service at any location where a pet with a potentially infectious condition exists. Pawfect Love Pet Care strives to provide clean, safe service to each of our clients. In doing so Pawfect Love Pet care strongly recommends that each pet be vaccinated, de wormed and protected from harmful insects according to veterinarian recommended standards.

This Veterinary Release Agreement is valid from the date below and grants permission for future veterinary care without the need for additional authorization each time Pawfect Love Pet Care cares for one or more of my pets. In signing this contract, I agree that Pawfect Love Pet Care has the sole authority to make health, medical, and financial decisions regarding the animals that will be scheduled to receive service.

Client Name (Printed) _____

Client Signature _____ Date _____