



Veterinary & Owner Consent Form

Owner to complete Sections A & B

Section A: Animals details			
Name:		Breed:	
Sex:		DOB:	
Address animal kept at:			

(Please sign your agreement below after reading Anglian Veterinary Physiotherapy's Terms & Conditions and Privacy Policy)

Section B: Owner details			
Full name:		Home Phone:	
Address:		Mobile:	
		Email:	
Signature:		Date:	

Section C: To be completed by Veterinary Practice.

Veterinary Surgeon's Declaration: In my opinion, the above animal is in a suitable state of health to undergo veterinary physiotherapy treatment and I understand that I am not responsible for any assessment or treatment that Anglian Veterinary Physiotherapy deems suitable for the patient.			
Signature:		Date:	
Full name:			
Practice stamp:			
Medical history of animal:			
Current medication:			