



**CONSENT TO PERFORM EUTHANASIA ON AN ANIMAL**

I (Name) \_\_\_\_\_ of

(Address) \_\_\_\_\_

being a person over the age of eighteen years, hereby authorize (Veterinarian Name)

\_\_\_\_\_ a registered Veterinarian to perform euthanasia on the

patient described below:

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Breed \_\_\_\_\_ Colour \_\_\_\_\_

Distinguishing marks .....

**DECLARATION**

Please tick:

I am the owner of the above named patient

The owner of the above named patient is \_\_\_\_\_ of

\_\_\_\_\_ and I am authorised by the above owner to present the patient for euthanasia.

In consideration of the said Veterinary Surgeon providing the requested treatment, \* and arranging disposal of the body. I hereby agree to pay the prescribed fees, and I further agree to indemnify him/her, his/her or agents, from any loss or Liability which they may incur as a result of any inaccuracy whether intended or otherwise in this my declaration .

(Signed) \_\_\_\_\_

(Witness) \_\_\_\_\_

(Date) \_\_\_\_\_