



WestVETS Animal Hospitals

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PET ADMISSION AND CONSENT FOR PROCEDURE

DATE: ____ / ____ / ____

PATIENT: _____

DESCRIPTION: _____

OWNER'S NAME: _____

PROCEDURE: _____

I hereby acknowledge that I am the owner/keeper of the above mentioned pet.

I give permission for this pet to undergo the procedure/s listed above.

I understand that while all care will be taken with my pet, there are risks associated with anaesthesia and surgery. Should my pet require extra urgent care as a result of an unforeseen circumstance, I give my permission for these procedures to be carried out. I understand that any costs incurred as a result are payable by me.

I agree that all costs incurred while my pet is hospitalised are payable upon discharge and failure to do so can result in WestVETS Animal Hospitals holding my pet at extra cost until such time as all fees are paid.

The onus is on me to remain informed as to the current balance of my account.

Owner's signature: _____