

Pet Name(s)_ 	
MEDICAL RELEASE FORM	
and well cared for is our first responsibility parents screen for pre-existing health con event that a medical emergency arises who provide it is imperative that we are immavailable facility. We will call ahead to the insure they can handle the emergency present for treatment. We notify the owner after we	of the highest importance. Insuring that your pet remains safe and as such we take it very seriously. We recommend our pet iditions, but some factors may be beyond our control. In the lile a pet is at our facility, or participating in a service that we necliately able to get them medical treatment at the closest veterinary offices in closest proximity geographically to us to ent. We will then rush the animal to the closest available facility to have secured a medical treatment center to avoid any delays. Sion as quickly as humanly possible, and any distractions may
•	at its sole discretion, deems the need for immediate medical orize recommended care to secure the emergency. I agree and

Signature of Owner

Print Name

Date:____

understand that a Playfurlots employee, owner, or affiliate will transport my pet to the closest available emergency facility. I further agree that I am financially responsible for any medical treatment my pet(s)

receives as a result of a medical emergency while attending services provided by Playfurlots.