

MAF Handling
Mountain Ash Farms
All Breed Professional Handlers
1401 S 3rd St #1687 Mabank, Texas 75147

LIMITED POWER OF ATTORNEY

I _____ hereby designate MAF Handling/Mountain Ash Farms and associates as my attorney-in-fact for the purposes of obtaining veterinary care for my dog, with the understanding that I _____ am responsible for all costs.

Dog Known as: _____

AKC Number: _____

Microchip or Tattoo Number: _____

This power of attorney includes, all medical treatment deemed necessary by a duly licensed veterinarian and to execute any consent, release or waiver of liability required by veterinary authorities' incident to the provision of medical, surgical or other essential care to my dog by qualified veterinary medical personnel's, which is deemed necessary by my attorney-in-fact. The undersigned agrees to hold harmless any veterinarian or veterinary professional for rendering to hold harmless any veterinarian or veterinary professional for rendering treatment to the above-named dog when authorized by my attorney-in-fact. This does not however, release said veterinarian or veterinary professional for any liability, which might arise from the manner in such care or treatment is rendered. Should the care or treatment recommended by the veterinarian or veterinary professional selected by my attorney-in-fact involve any permanent disfigurement of the dog (other than surgery in an emergency situation) or have the effect of rendering the dog sterile for reproductive purposes, my attorney-in-fact and the treating veterinarian are directed to contact me for authorization to proceed prior to conducting such procedures. The power of attorney does not authorize euthanization of my dog without prior verbal or written approval from me unless in extreme medical emergencies.

This limited power of attorney shall stand in force unless revoked in writing, this limited power of attorney is valid as long as the dog resides in the possession of MAF Handling/Mountain Ash Farms.

Sworn to and subscribed by _____ on ____/____/____

Clients Name: _____

Clients Signature: _____