



Medication Permission Form

Muddy Mutts LLC is happy to administer any veterinarian prescribed or supplemental medications your dog requires, with the exception of injections. Medications and supplements must be brought in their original container from the vet or pharmacy and be clearly labeled with your dog's name, veterinarian contact info, and dosage. If your pet is aggressive during medication administration, we reserve the right to refuse administering medication to your pet and you will be notified. If your pet requires a pill pocket or any other items to take medication(s), you the owner must provide these items. (Ex. cheese, peanut butter).

Owner's Name: _____

Phone Number: _____

Dog's Name, Breed, Age: _____

Name of Veterinarian Clinic: _____

Vet's Phone Number: _____

Please clearly list all medication & dosage to be administered to your dog:

Name of Medicine: _____

Dosage & time normally given: _____

Date/time medication was last given: _____

Additional instructions: _____

Name of Medicine: _____

Dosage & time normally given: _____

Date/time medication was last given: _____

Additional instructions: _____

Name of Medicine: _____

Dosage & time normally given: _____

Date/time medication was last given: _____

Additional instructions: _____

Name of Medicine: _____

Dosage & time normally given: _____

Date/time medication was last given: _____

Additional instructions: _____

By signing this form, client authorizes Muddy Mutts LLC to administer the above medication to their dog. By signing this form, you or your representatives agree not to hold Muddy Mutts LLC responsible for any adverse effects to your pet as a result of medication administering while in the care of Muddy Mutts LLC. By signing this form, you acknowledge that you understand and accept the terms and conditions set forth by this agreement.

Client's Signature: _____ **Date:** _____