

MEDICAL RELEASE FORM

This is a required form for all Barktown participants receiving services.

First and foremost the safety and well being of your pet(s) is the highest of importance. Insuring that your pet remains safe and well cared for is our first responsibility and as such we take it very seriously. We do our best to have our pet parents screen for pre-existing health conditions but some factors may be beyond our control. In the even that a medical emergency arises while a pet is at our facility or participating in a service that we provide it is imperative that we are immediately able to get them medical treatment at the closest available facility. We will call ahead to the veterinary offices in closest proximity geographically to us to insure they can handle the emergency present. Your pet will be rushed to the closest available facility for treatment and you will be notified. We notify the owner after we have secured a medical treatment center for the animal to avoid delays that may be caused by emotion on the part of the owner. Our goal is to get your pet medical attention as quickly as humanly possible, and any distractions may interfere with that process.

For that reason, it is a requirement to have our pet parents sign this form.

I understand that in the even of a medical emergency at Barktown, at it's sole discretion, deems to need the immediate attention of a licensed veterinarian, I authorize Barktown to seek medical attention at the closest available veterinary facility. I further agree that I am financially responsible for any medical treatment my pet(s) receive as a result of a medical emergency while attending services provided by Barktown.

Signature of Owner:_____ Date:_____

Printed Name:_____

Please note: If your dog is to collapse and become unconscious, we will provide CPR by our certified staff. Please understand, although CPR is a rescue technique to resuscitate your dog, it can be physically traumatic (potential broken ribs). Please indicate below that you understand the potential risks and recovery time of CPR, and that you would like for us to perform this service OR that you do not wish for your dog to be resuscitated.

___ Yes, perform CPR and all efforts to resuscitate my dog.

___ No, please DO NOT perform CPR or attempt to resuscitate my dog.

