



Consent for Canine Rehabilitation

Dogs name: _____ Breed: _____ Age: _____

Owner's name: _____ Phone: _____

Address: _____

Referring Veterinarian: _____

Referring Clinic & phone number: _____

I would like to allow pictures and/or videos of my dog to be featured on the FUREVER MOBILE K9 social media (i.e., website, Facebook, Instagram, etc.) YES _____ NO _____

Consent:

1. I am the owner or agent of the above dog described above. I have the authority to execute this consent and I am over the age of 18. I hereby consent to and authorize the administration of canine rehabilitation services based upon the initial intake and the referral form from the referring Veterinarian.
2. I understand and acknowledge that Alix Murray and Furever Mobile K9 only provide canine rehabilitation. I understand that she is not a veterinarian and that I have a relationship with a regular veterinary clinic/hospital for routine and emergency veterinary services. If I have medical concerns regarding my canine I will reach out to my regular veterinary clinic and or (emergency) hospital.
3. I have had the fees outlined to me and agree to pay all such fees and charges at the time of service. I understand that appointments that are booked but are canceled within 24 hours of the appointment may be subject to a cancellation fee up to the full cost of the visit.
4. I understand that the procedures will be carried out by Alix under her training as a Certified Canine Rehabilitation practitioner (CCRP). I understand that the procedures carried out will be best suited for my dog and will be explained to me so that I can provide informed consent regarding all treatment options under her training.
5. I acknowledge that Furever Mobile K9 aims to create a stress-free environment for my dog. However, I agree to notify Alix of any behavioral issues my dog may have, including but not limited to sensitivity to touch, aggression, bite history and if my dog wears a muzzle or has required a muzzle in the past. I understand that Alix may determine if treatment will be best carried out with a muzzle and has the right to decline treatment unless the canine is muzzled.
6. I have been advised as to the nature and purpose of canine rehabilitation and realize that no guarantee exists as to the result of referring to the veterinarian's diagnosis, prognosis, and treatment of the dog above.
7. I understand that Alix and Furever Mobile K9 are a part of my pet's comprehensive team of trained professionals and will be in contact with my regular, or referring veterinarian, as appropriate for my pet's best interest and ongoing care.
8. I have read and agree to the statements above in this consent.

Signature of Owner

Date