Pet Euthanasia Consent

The pet owner signs; the veterinary clinic countersigns.

VETERINARY CLINIC NAME

PHONE

Pet owner

FULL NAME

EMAIL

PHONE

ADDRESS

Pet

PET NAME

SPECIES

BREED

AGE (YRS)

SEX

WEIGHT (KG)

LAST VACCINATION

Service

VETERINARIAN

DATE

MEDICAL REASON

Euthanasia is a peaceful, painless end of life, given by injection after sedation. The vet has discussed the pet's condition and the options, and you may stay with your pet throughout.

Terms

1. To the best of my knowledge, the pet has not bitten a person or animal in the last 10 days.
2. I understand this is final and cannot be reversed.
3. Fees for the procedure and aftercare are payable as quoted.

Aftercare

- ○ Owner takes body home
- ○ Individual cremation
- ○ Communal cremation
- ○ Burial arranged by clinic

- ☐ I would like a paw print or clipping of fur.
- ☐ I am the owner, or am authorised by the owner, and the information above is true.

Pet owner

SIGNATURE

PRINTED NAME

DATE

Veterinary clinic

SIGNATURE

PRINTED NAME

DATE