

## **Euthanasia Consent**

**Pet's Name:**

**Breed:**

**Color:**

**Sex:**

**Age:**

**Weight:**

I am the owner (or authorized agent of the owner) of the animal described above. I hereby order and give MacInnes Mobile Vet and its personnel complete authority to euthanize my pet in whatever humane manner they deem appropriate, and to dispose of its remains as specified below and in accordance with hospital policy. I hereby forever release MacInnes Mobile Vet and its personnel from any liability that may arise from euthanizing or disposing of my pet.

To the best of my knowledge my pet has not bitten any person or animal during the past fifteen (15) days, nor has my pet ever been exposed to rabies. I hereby grant permission for a postmortem study of my pet, if deemed necessary by the veterinarian. I request that my pet's remains be cared for as follows:

☐ Private cremation with the ashes returned

☐ Private cremation without return of the ashes

☐ Communal cremation without return of the ashes

☐ Return of the pet's remains to me for home burial (subject to applicable law)

☐ Complimentary clay paw print

☐ Complimentary fur clipping

I have carefully read, and fully understand, this consent. The fees associated with these services have been explained to me, and I agree to pay such fees in full at the time of service.

**Signature:**

**Name:**

**Phone:**

**Date:**