



Medical / Surgical Release Form

Date _____ Procedure _____

I hereby consent and authorize you, Dr. _____ and the staff of this hospital to receive, prescribe for, treat, perform diagnostics, and operate upon (animal's name) _____. I certify that I own the aforementioned animal(s) or am authorized by the owner to give the consent expressed herein.

- 1. There are inherent risks involved with any anesthetic. I have been informed as to the nature of the procedures and/or operations and the risks involved. I acknowledge that no guarantees have been made to me as to the results of any treatment, procedure or surgeries. I understand that all reasonable precautions to ensure the well being of my pet will be taken during the care, hospitalization, and treatment at Arch Creek Animal Clinic.
- 2. I have received an estimate of the costs involved. It is only an estimate. If further treatment or surgery becomes necessary, the cost will then change. I may get an update at anytime by calling the office between 8am and 6pm.
- 3. A deposit of 50% of the bill is required before treatment begins, and the balance is due when my pet is released. Payment may be in the form of check, credit card or cash. In-house financing is available, preauthorization and completion of all paperwork must be done prior to initiation of my pets medical procedure.

I authorize the following recommended items. I am aware that these are at an additional charge.

IV Catheter and fluids with surgery (please check to authorize) Post operative pain medication (please check to authorize)

By signing below, I acknowledge that I have read and understand this release and I agree with the terms and conditions expressed herein. I understand that if this balance is not paid and requires collection processing, I will be responsible for the balance and any collection and/or attorney fees incurred in collecting this debt.

Signature (of owner or authorized agent): _____

Print name: _____

Number where you can be reached: _____ Alternate number: _____