

# Fur to Feathers Pet Sitting Service

Veterinarian Information and Veterinarian Authorization rev 7/2023

Vet Practice Name: \_\_\_\_\_

Vet Doctor Name: \_\_\_\_\_

Vet Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Vet Phone #: \_\_\_\_\_

Pet Name(s): \_\_\_\_\_

Client Name: \_\_\_\_\_

Client Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Client Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Location of travel carrier/crate for emergencies? \_\_\_\_\_

**To whom it may concern:** During my various absences, **Fur to Feathers Pet Sitting** will be caring for my animal(s). They have my permission to transport them to and from your office or, in the case of large animals, request "on site" treatment from your office as is deemed necessary. I authorize you to treat my animal(s) and I will be fully responsible for **all fees and charges** and will pay for all charges incurred on my behalf upon my return. I further authorize you to give out any information about my animal(s) to **Fur to Feathers Pet Sitting**.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

## Urgent Veterinary Treatment Authorization

This form will be used to authorize **urgent** veterinary treatment in the event that your pet(s) require urgent treatment during your absence, and we are unable to contact you at the time. Should you change vets, please notify **Fur to Feathers Pet Sitting** before service dates.

**To whom it may concern:** I have contracted for services from **Fur to Feathers Pet Sitting** during my absence and I authorize them to act on my behalf to request urgent veterinary treatment and services when they deem it necessary. I authorize you to treat my pet(s) and I accept full responsibility for fees and charges incurred in the treatment of my pet(s). I will pay for all charges incurred on my behalf immediately upon my return.

Special Instructions: \_\_\_\_\_

**Fur to Feathers Pet Sitting** reserves the right to utilize the services of any available veterinary clinic.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date