

Riverside Pet Grooming

10555 Indiana Ave., suite 106

Riverside, CA 92503

(951)343-3222

Emergency Release Form, Rev. 08.14

It is our desire to follow your wishes as we care for your pet. Therefore, we have created this form for your convenience.

I give Riverside Pet Grooming (RPG) and it's owners my permission, while caring for my pet/pets, _____, to seek necessary medical treatment that may come up during my absence. In the event that my veterinarian is unavailable, I give RPG permission to seek other veterinary services. I agree to pay for all services that are not covered by the Health Care Warranty.

Please read the following and check those that apply:

_____ I do **not** want any extreme measures taken to prolong my pet's life.

_____ I want all medical measures taken to help my pet in the event of illness, not to exceed \$_____.

In the event my pet should pass away, I would like:

_____ For my pet to be taken to my veterinarian on file where they will know my wishes.

_____ For RPG to hold my pet until my return. If RPG's facilities are unavailable, I authorize RPG to arrange for my pet to be held elsewhere.

_____ For RPG to have my pet cremated and I agree to pay all expenses.

_____ Private cremation (ashes returned)

_____ Communal cremation (no ashes returned)

If you have any questions or concerns, please feel free to call us.

Owner's Signature

Date

Owner's Name (Please Print)

Pet/Pets Name/Names (Please Print)