

Vaccine Clinic Release Form

Owner Information:

Name: _____ Email _____

Phone: _____ - _____ - _____ or _____ - _____ - _____

Address: _____

Animal Information:

Name: _____ Breed: _____

Color: _____

Age _____ Sex: Male Female

Authorization and Release - Please initial next to each line

____ I request and authorize Rancho Sequoia Veterinary Hospital to vaccinate the above described animal.

____ I understand that vaccines can cause adverse reactions in some animals, such as a severe allergic reaction. I hereby release Rancho Sequoia Veterinary Hospital and any employees or volunteers from any claims arising out of or connected with giving these vaccinations.

____ I certify that my animal is current on all vaccinations, or am having Rancho Sequoia Veterinary Hospital vaccinate my animal, or am waiving the right to protect my animal by having it vaccinated. I understand the inherent risk of failing to maintain current vaccinations and waive all claims arising out of or connected with the performance of this procedure due to such failure.

____ I certify that my animal is in good health or have disclosed all health concerns to the staff at Rancho Sequoia Veterinary Hospital

____ I understand that Rancho Sequoia Veterinary Hospital has the right to refuse services to any animal to whom vaccinations and other procedures is deemed a health risk.

____ I understand that during or after any procedure if my animal has any complications, I will need to have my animal seen by my regular veterinarian for treatment. I understand I need to watch my animal closely after any vaccination for complications.

____ I hereby release Rancho Sequoia Veterinary Hospital and any employee or volunteer from any and all claims arising out of or connected with the performance of the procedure or connected with giving these vaccinations. I acknowledge that I was granted an opportunity to discuss with a veterinarian, and have no further questions.

Owner Signature: _____ Date _____

Payment required before service:

<input type="checkbox"/> Bord Vaccine	\$20.00	<input type="checkbox"/> Canine Influenza	\$38.00
<input type="checkbox"/> Rabies vaccine	\$12.00	<input type="checkbox"/> Rattlesnake	\$28.00
<input type="checkbox"/> Dhpp Vaccine	\$17.00	<input type="checkbox"/> Lyme	\$53.00