

Nominated Veterinary Practice Form

I can confirm that [Veterinary Practice] is the nominated for which [Premises] is registered.

[Veterinary Practice] confirm the following;

- We will diagnose, investigate and treat causes of injury or illness in dogs/cats in [premises] care.
- In the event of the death of a dog or cat in [premises] care that you we store the body until the owner returns, unless alternative arrangements have already been made.
- That isolation facilities will be made available at the Veterinary practice for dogs/cats that are infectious.

[premises] confirm the following;

- Every effort to contact the owner or nominate proxy will be made prior to agreeing a cause of treatment. However, consents for [premises] to act on behalf of the owner have been signed and will be provided to the Vet.
- The cats/dog's medical history and vaccination records will be provided to the Vet upon request.

For [premises]		For [Veterinary Surgery]	
Name:		Name:	
Signature:		Signature:	
Position:		Position:	
Date:		Date:	