



Pet Sitter Consent Form

For your peace of mind while you are away, please fill out the following form and return to Hollywood Hill Animal Hospital to keep in your chart in case of needed veterinary care.

Please retain one copy for your caretaker's reference.

Pet Owner: _____ Pet Caretaker: _____

Address: _____ Address _____

Phone / fax: _____ Phone / fax: _____

Expected dates of absence: _____ Pet's name(s): _____

In the event of illness or injury I authorize the following to make decisions about my pet care on my behalf:

- Veterinarian at Hollywood Hill Animal Hospital
- Other: _____

I authorize any veterinary care deemed necessary by the above named party up to:

- Unlimited \$ amount
- Set limit: \$ _____

In the event the attending veterinarian determines that my pet is suffering and/or is incurably injured, I: *(please check one)*

- give my consent for euthanasia.
- do not give my consent for euthanasia.

If my pet should die or is euthanized, I request that: *(please check one)*

- the body be retained until I return or
- be **individually** cremated and I agree to pay the fees for such services or
- be **communally** cremated and I agree to pay the fees for such services.

Signature of Owner

Date