



www.johndunsford.co.uk

mail@johndunsford.co.uk



CONSENT FOR EUTHANASIA

John Dunsford & Associates
The Equine Veterinary Clinic
Mill Lane
Stedham
West Sussex GU29 0PS

01730 810742

OWNERS DETAILS:

Name:

Address:

Postcode

Telephone

Home:

Work:

Mobile:

NB: PLEASE COMPLETE THE SECTION BELOW IF YOU ARE NOT THE OWNER BUT HAVE AUTHORITY TO ACT ON BEHALF OF THE OWNER:

Name:

Address:

Postcode

Telephone

Home:

Work:

Mobile:

ANIMAL DETAILS:

Name:

Colour:

Age:

Sex:

Female

Gelding

Male

Microchip/Freezemark/Brand:

I request the euthanasia of the animal described above by humane killer. I have discussed the appropriate methods of disposal available.

Yes	No
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I request the euthanasia of the animal described above by injection of a euthanasia drug. I have discussed the appropriate methods of disposal available.

Yes	No
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I have been advised that the cost of euthanasia will be:

£

I understand that the costs of cremation or disposal are not included in this price and are not handled through the practice and are provided by third party contractors. The client must establish the cost of disposal and the service they require with the disposal contractor and remain solely responsible for their costs and settling their account.

If you are NOT the owner, please tick the box to confirm you have the authority to act on behalf of the owner of the animal described above.

Please tick the box if you are UNDER the age of 18.

SIGNATURE:

Date: