## WAGGIN' TAILS PET RANCH PERMISSION TO TREAT IN AN EMERGENCY \_\_\_\_\_, give Waggin' Tails Pet Ranch permission to have my pet treated by a veterinarian if necessary. I understand that Waggin' Tails Pet Ranch will do everything possible to get my pet treatment at my veterinarian. If my veterinarian is not available, I give Waggin' Tails Pet Ranch permission to seek medical treatment elsewhere. I understand that in the event of an emergency after hours, Waggin' Tails Pet Ranch may have to seek treatment at an emergency clinic. If the emergency is due to boarding, our Vet Warranty covers up to \$500. I understand that I am responsible for all charges incurred (either above \$500 if a covered charge or for all charges that are not covered under our Vet Warranty. Please ask a receptionist for full Vet Warranty terms if needed. A VALID CREDIT CARD IS NEEDED ON FILE FOR ALL CLIENTS. In the event that I cannot be reached, my wishes are as follows: I authorize Waggin' Tails Pet Ranch to spend up to \_\_\_\_\_(write in amount) on my pet in the event of an emergency. I understand that this may limit the ability of the emergency clinic to effectively treat my pet if the amount is less than is needed to treat an illness or injury. Keep in mind when entering an amount that most emergency clinics charge a minimum of \$250 for an office visit and evaluation. Please ask a receptionist for more information or help choosing an amount. A staff member will transport your pet and stay with them during check in and as much of the treatment as possible. Waggin' Tails Pet Ranch does this as a courtesy to our clients and we do not charge for this service. We will also use our best efforts to contact you and keep you informed. We understand as pets get older, there may be difficult decisions to make regarding the extent of emergency care that would be performed. Please let us know if you have an older pet or a pet with medical conditions that would affect medical care, and we will create a separate document noting this. We ultimately want to follow through with your family's wishes in an emergency situation and get your pet the appropriate care needed. I am authorizing Waggin' Tails Pet Ranch to seek medical treatment and use my current credit card on file for all charges according to my above requests. This contract applies to all pets owned by the family. Printed name: Signature: \_\_\_\_\_ Date:\_\_\_\_\_