



Client Consent Form For Fun and Fitness Sessions

Please return the completed form to All Paws & Equine Vet Physio, 29 Cann
Hall Drive, Bridgnorth WV15 5BG or email
allpawsandequinevetphysio@outlook.com at least 24 hours prior to your
session.

ANIMAL DETAILS

Name:	Age/D.O.B:
Sex:	Breed:
Colour/description:	
Insured/insurance company:	

CLIENT DETAILS

Name:	Address:
Home phone:	
Mobile:	
Email:	Postcode:

VETERINARY PRACTICE DETAILS

Practice Name:	Address:
Usual Veterinary Surgeon:	
Telephone:	
Email:	Postcode:

HISTORY

Any previous injuries, illnesses or surgeries:	
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DECLARATION

The named dog is owned by myself and is registered with the veterinary practice detailed. He/she is fit and healthy and I therefore authorise consent for my dog to attend fun, fitness and conditioning sessions provided by All Paws & Equine Vet Physio.

Signed:

Print Name:

Date: