



## Veterinarian Authorization

### Vet Info

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

In the event that my pet becomes ill, Jen's Dog House is authorized to take my pet to the above veterinarian for diagnosis and treatment. The veterinarian is to call me for authorization to treat. If I am unavailable and this is an emergency, the veterinarian is hereby authorized to treat the animal at his/her discretion.

The charges for any vet visit or treatment will be applied to my account if the veterinarian will do so. I authorize him/her to charge up to \$\_\_\_\_\_ for treatment. In the event that the vet requires immediate payment it may be charged to my credit card below: (if you are uncomfortable giving this information, I can request the Vet get payment info from you over the phone.)

Credit Card Type:    Visa            Mastercard            Discover            American Express

Name on Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Pet Owner Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*This authorization will remain valid for 1 year from date signed. It will need to be updated annually.