

## Euthanasia Consent Form

<b>Owner:</b>	
<b>Address:</b>	
<b>Home Phone:</b>	
<b>Mobile Phone:</b>	

<b>Patient Name:</b>	
<b>DOB:</b>	
<b>Age:</b>	
<b>Breed:</b>	
<b>Sex:</b>	
<b>Colour:</b>	

I, \_\_\_\_\_, am the owner or duly authorised agent of the owner for the above-named animal, I hereby consent to and request humane euthanasia for my pet/animal by a veterinarian at this practice.

Please tick accordingly:

- I wish the body to be returned to me / the owner for disposal/burial
- I request cremation and that the ashes be returned to me / the owner
- I request cremation but do not want the ashes returned to me / the owner

Signed for on behalf of the owner: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Witnessed by practice staff member: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_