



# A Dog's Day Out – Emergency Care Form



The purpose of this form is to give permission to A Dog's Day Out (ADDO) to bring my dog(s) to your veterinary facility, should there be an emergency situation or should my dog need medical attention of any nature, while in the care of ADDO.

Dog Name (List all the apply)	Sex M or F	Birth Date	Breed or Mix	On Medication? If no, say "No". If yes, what medication?

I have initialed the options for Veterinary care directly below, which I approve in my absence:

Dog Owner's Initials	Monetary Benchmarks Approved for Care As Needed
	\$500 Limit
	\$1,000 Limit
	"Heroic Measures" (\$1,000+) Heroic Measures is a veterinary term that can be used to include the need for surgery.

### Emergency Care - Credit Card Information

\_\_\_ Please use my credit card which is already on-file at ADDO, in case of an emergency, as approved above.

\_\_\_ Name on card: \_\_\_\_\_ Circle One: Visa or MasterCard

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Sec. Code \_\_\_\_\_

### Client & Alternate Emergency Contacts

Should you have any questions in my absence & I cannot be reached immediately, please reach out to my emergency contacts provided below. I have listed primary contact numbers in order of importance, to ensure immediate medical attention is given to my dog.

Name of Contact	Relation to Client	Phone	Alt. Phone (optional)	Email
ADDO Client	Self			

\_\_\_ If client has initialed on this line, they know they will not be accessible from \_\_\_\_\_ to \_\_\_\_\_, 2016.

To any Veterinarian caring for my dog, please accept my signature below to provide immediate care as needed.



\_\_\_\_\_  
Client - Print Name

\_\_\_\_\_  
Client - Signature

\_\_\_\_\_  
Date

