Lori’s Grooming

14202 N. Scottsdale Rd. #153

**Medical Release Form**

**AGREEMENT TO HOLD HARMLESS**

**Should any emergencies occur while my animal is Boarding, at Day-Care, or Grooming at Lori’s Grooming, I give their staff permission to treat my animal(s) at the nearest Animal Hospital at my expense. The undersigned owner or authorized agent of the animal(s) named \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby authorize the emergency facility and whomever may be designated as their assistants, to administer such treatments and to perform such procedures as are considered therapeutically or diagnostically necessary for the care of said animal(s), including the administration of anesthesia.**

**In the event that emergency treatment is required, I authorize the Animal Hospital and their veterinary staff and their assistants to perform medical and surgical treatments necessary to care for or preserve the life of said animal(s) until I am further contacted for further authorization. I understand that no guarantee of successful treatment is made. I accept financial responsibility for the treatment of the above named animal(s), and I understand that payment in full is due upon release of the patient, or when service is otherwise terminated. I certify that I have read and fully understand this Authorization for Emergency Treatment, the reasons why such treatment is considered necessary, as well as the advantages and possible complications.**

**I further understand that Lori’s Grooming is an open play facility where dogs are allowed to interact and play in a cage-free setting. I understand the advantages and possible complications in such a facility and I understand and accept all risks inherent in the open play format at Lori’s Grooming. I understand that my pet(s) may walk, run, play, jump, roll, tumble and/or engage in any other activity while in Lori’s Grooming open play setting. I further understand that open play may lead to injury to my animal(s) from such play or interaction with other pets and Lori’s Grooming staff. I understand that possibilities include but are not limited to scratching, biting, and fighting. I expressly acknowledge and accept all risks of injury to my pet(s) while my animal(s) are at Lori’s Grooming. I certify that I have read and fully understand this Authorization for Emergency Medical Treatment and Agreement to Hold Harmless. I further understand and agree that Lori’s Grooming and its staff will not be liable for any emergencies, accidents, or health problems that may develop during or after my animal’s visit to Lori’s Grooming, and I hereby release Lori’s Grooming, its owners, employees, groomers, landlord and agents from liability, of any kind, from my pet’s attendance at Lori’s Grooming.**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**