Owners consent to treat

I herby certify that I give permission for veterinary physiotherapy treatment to be performed on my animal by Rhiannon Kelsall of Alpha Animal Physiotherapy Ltd..

I confirm that my animal is registered with the veterinary practice stated below and has been seen by a Veterinary Surgeon within the last 12 months. To my knowledge, my animal has no injury or health condition that would prohibited veterinary physiotherapy treatment without veterinary referral (see terms and conditions for further information).

I give permission for the veterinary physiotherapist to discuss treatment with my veterinary surgeon and understand that the veterinary physiotherapist may refer my animal back to the veterinary surgeon.

***Animal Name:***

***Owner Signature:***

***Print Name:***

***Date:***

***Name of Veterinary Surgeon:***

***Practice Address:***

***Practice Contact Details:***