

Lynwood Kennel

Pick-Up Approval Form

Customer Name: _____ **Dog**___ **Cat** ___

Pet's Name: _____ **Breed/Color:** _____

Name of person(s) authorized to pick up this pet:

1. _____

2. _____

3. _____

Owner's signature: _____ **Date:** _____

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Statement of Authorization

I, _____ by signing this Statement of Authorization, are authorizing my Veterinarian to provide any information necessary for proper care of _____ (pet's name) in my absence.

In the event of an emergency, I/we agree to allow the staff of Lynwood Kennel to make a decision as to which is the fastest solution to the situation and I agree to accept financial responsibility for the care given to my pet.

Owner's Signature _____ **Date** _____