

Veterinary Consent Form

Jordanna Lee (BSc, MSc, MAA and RAMP)

Owner:

Address:

Phone Number:

Email:

Animal's Name:

Age:

Sex:

Breed:

I declare that I am the legal owner of this above named animal and that all the information presented is correct to the best of my knowledge. I give consent for the animal above to be treated by Jordanna Lee of JL Animal Chiropractics, who is a member of the McTimoney Animal Association and the Register of Animal Musculoskeletal Practitioners. I have received veterinary authorisation for the above animal to undergo McTimoney treatment.

Owner Signature:

Date:

Vet Practice Name:

Vet Practice Address:

Telephone:

Reason for approach, treatment or concern:

OR

No diagnosis the use of McTimoney Treatment would be beneficial animal's maintenance?

Signature of veterinarian:

Date:

Jordanna Lee of JL Animal Chiropractic's acknowledges and respects the Veterinary Surgeons Act 1966 and the Exemption Order 2015 by never working on an animal without gaining prior veterinary consent.