

# HEALTH & EMERGENCY AUTHORIZATION

Owner: \_\_\_\_\_  
Last Name, First Name

Pet: \_\_\_\_\_

Our goal at Stuebner Airline Pet Resort & Spa (SAPRS) is to ensure that your pet is well cared for while at our facility. Part of our responsibility is to recognize any change in your family member's behavior that might require professional attention. Our staff veterinarians are always available to evaluate and treat your pet if it becomes necessary.

I am aware that if I am not able to be contacted and the attending veterinarian deems immediate treatment is necessary, I will be responsible for the charges incurred that are necessary to stabilize my pet while still attempting to contact me. Please indicate how you would like our staff to handle the situation.

**Please select one of the following options:**

\_\_\_\_\_ If I am unable to be reached, I authorize what is best for my pet.

\_\_\_\_\_ Verbal permission is REQUIRED before speaking with the veterinary staff in regards to treatment.

**Picking-up Your Pet**

In the event that the owner's trip is extended, SAPRS must be notified as soon as the revised pickup date is known. Should your pet be left 10 days beyond the original pick-up date and you cannot be contacted, your pet will be considered abandoned. You will be sent a certified letter and your pet will be set up for adoption.

\*\*\*Please disclose any "Pre-Existing" conditions: \_\_\_\_\_  
\_\_\_\_\_

Pet's Primary Veterinarian: \_\_\_\_\_ Veterinarian's Phone #: \_\_\_\_\_

**This authorization is good for one (1) year from today's date.**

**\*\*\*Customer responsible for any vet charges incurred while boarding. Payment due upon pickup.\*\*\***

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***If needed – How should we contact, you?***

Phone/Text: \_\_\_\_\_

Email: \_\_\_\_\_

**ALL PET ITEMS/BELONGINGS WILL BE MARKED WITH THEIR NAME IN BLACK PERMANENT SHARPIE ON A TAG IF POSSIBLE. IF THERE IS NO TAG THE ITEM WILL BE WRITTEN ON. WE ARE NOT RESPONSIBLE FOR DAMAGED OR LOST ITEMS!**