



**TUCKER'S PET SERVICE**  
**512-826-7806**

***Pet Care Emergency Medical Form***

*During my various absences, Rene' Downey will be caring for my animal(s). She has my permission to transport my animal(s) to and from your office for treatment as deemed necessary. I authorize you to treat my animal(s) and I will be fully responsible for all fees and charges and will pay for all charges incurred on my behalf upon return. I further authorize you to give out any information about my animal(s) to Rene' Downey.*

*Please file this card with my records.*

*Veterinarian:*

*Address:*

*Phone Number:*

*Animal Names:*

|       |       |       |       |       |
|-------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

*Owner Name(s)::*

*Owner Signature(s)::*

*Date:*

|       |
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| _____ |