

NOTICE TO EMERGENCY RESPONDERS

Print Clearly:

I/We, _____,
own the animal(s) in this trailer / barn / show stable.

Address: _____

Phone: Home (_____) _____ - _____

Cell (_____) _____ - _____

Emergency contact with has legal authority to make decisions on treatment for the animal(s):

Name: _____

Address: _____

Phone: Home (_____) _____ - _____

Cell (_____) _____ - _____

E-mail: _____

Home veterinarian(s):

Name: _____

Phone: Office (_____) _____ - _____

Cell (_____) _____ - _____

Pager (_____) _____ - _____

E-mail: _____

Insurance Co.:

Contact: _____

Phone: (_____) _____ - _____

_____ *In the event that I / we are incapable of making decisions regarding the health and well-being of the animal(s) in an accident or emergency, we hereby authorize and shall hold harmless a veterinarian who determines the health status of the animal(s), provides emergency health care, or administers a euthanizing agent if the veterinarian determines that an animal cannot be saved.*

_____ *I further agree that in the event that I / we are incapable of making decisions regarding the health and well-being of the animal(s) in an accident or emergency, we hereby authorize and shall hold harmless a trained and knowledgeable emergency responder who will administer noninvasive calming, health stabilizing, and safety-related care to said animals.*

Signed, _____ Date _____ / _____ / _____

Signed, _____ Date _____ / _____ / _____

Witness, _____ Date _____ / _____ / _____

Please freely distribute!