

Last name _____

Acc # _____

Virginia Veterinary Disclosure Form

(Please read carefully before signing)

Acredale Animal Hospital, Inc. has continuous medical staffing hours 24 hours a day, 7 days a week, including Holidays.

Our appointment hours are as follows: Monday thru Thursday 8am-8pm, Friday and Saturday 8am-5pm.

We take responsibility for caring for your pets very seriously. If your pet becomes ill, or shows evidence of fleas, worms, or any other parasite, they will be treated at your expense. If you do not wish for your pet to be treated then we cannot accept your pet.

Except for food and medication, we take no responsibility for any items you select to leave with your pet.

I have read this form and I am aware of the above staffing hours.

Date: _____ Signature: _____

While my pet is in your custody, I can be reached at the following telephone numbers:

() _____ or () _____