

# Cruise Control Canine Massage Veterinary Consent Form



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 www.cruisecontrolcaninemassage.co.uk

### Owner's details

<b>Name:</b>	
<b>Address:</b>	
<b>Phone number(s):</b>	
<b>Email address:</b>	

### Dog's Details

<b>Name</b>		<b>Breed</b>		<b>Sex</b>	
<b>D.O.B</b>		<b>Colour</b>		<b>Neutered?</b>	

I declare I am the legal owner of the above named dog and that all information presented is correct to the best of my knowledge. I give consent for my dog to have massage therapy by Nicola Dew of Cruise Control Canine Massage.

**Owner Signature:** ..... **Print Name** .....

**Date**.....

<b>Veterinary Surgeon</b>	
<b>Practice Address &amp; Tel No./ Practice Stamp</b>	

**YOUR VET MUST COMPLETE THIS AREA BELOW ALONG WITH A SIGNATURE**

**Reason for approach, treatment, areas of concern**


**Is the dog on medication? If yes, what:**

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**In your opinion is the dog named above in a suitable state of health to undergo Massage Therapy? Yes/No\***

**\* Delete as applicable Signature of Veterinarian ..... Date .....**

*I Nicola Dew respect the Veterinary Surgeons Act 1966 and Exemption Order 2015 by never working upon an animal without gaining prior veterinary approval*