



## CANINE MEDICAL WAIVER

**Two Dogs & A Goat Incorporated** (the “Company”) agrees to administer medication to my pet \_\_\_\_\_ (name of pet). My animal is presently under the care of \_\_\_\_\_ (name of veterinarian), who has prescribed \_\_\_\_\_ (medication) for \_\_\_\_\_ (condition).

I have explained dispensing information and the effects of this medication to the Pet Sitter and the Company. Attached please find dispensing instructions and emergency information.

I acknowledge that the Company services will be performed in accordance with my instructions contained herein. I waive any claim against **Two Dogs & A Goat Incorporated** unless the Company is negligent and does not perform as agreed herein.

**Client:** \_\_\_\_\_

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

### **Instructions For Dispensing Medications and Emergency Information:**

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**Two Dogs & A Goat Incorporated**  
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Canine Form #7