

EQUINE SPORTS MASSAGE THERAPY

Grange Farm, Fellbeck, Pateley Bridge, Harrogate, North Yorkshire, HG3 5ES

⁷el. 07531 06942⁵

DEBORAH RICHMOND ICAT DIP.(Dist), BHS INT.SM

OWNER DETAILS:				
NAME:				
ADDRESS:				
TEL:				
ANIMAL DETAILS:				
NAME:			D.O.B	
COLOUR:	BREED:		SEX:	
HEIGHT:	WEIGHT:		VACCINATIONS:	
THIS SECTION TO BE COMPLETED BY ANIMAL'S VETERINARY SURGEON				
VETERINARY SURGEON:				
PRACTICE ADDRESS:			PRACTICE STAMP:	
TELEPHONE NO:				
SUMMARY OF THE ANIMAL'S INJURY OR CONDITION, AREAS OF CAUTION, COMMENTS, ETC:				
MEDICATION DETAILS:				
I GIVE MY CONSENT FOR THE ABO	OVE NAMED ANIMAL TO REC	CEIVE MASSAG	GE TREATMENTS.	
SIGNATURE: DATE:		DATE:		
(VETERINARY SURGEON)				
I/WE DECLARE THAT I/WE ARE THE LEGAL OWNERS OF THE ANIMAL NAMED ABOVE AND THAT ALL THE INFORMATION SHOWN ON THIS FORM IS CORRECT. FURTHER I/WE HAVE READ AND FULLY ACCEPT THE TERMS AND CONDITIONS PRINTED OVERLEAF.				
SIGNATURE/S:		DATE:		
(OWNER/S)				

TERMS AND CONDITIONS:		
1.	ANIMALS WILL NOT BE TREATED WITHOUT THE PRIOR AUTHORISATION OF THEIR VETERINARY SURGEON.	
2.	WHILST EVERY CARE IS TAKEN OF THE ANIMAL UNDERGOING TREATMENT, IT IS DONE SO ENTIRELY AT THEIR OWNER'S RISK.	
3.	ANIMALS WITH INFECTIOUS OR CONTAGIOUS DISEASES WILL NOT BE TREATED.	
4.	OWNERS ARE REQUIRED TO NOTIFY DEBORAH RICHMOND IF, DURING A COURSE OF TREATMENTS, THE ANIMAL'S INJURY OR CONDITION WORSENS, OR IF THE VETERINARY SURGEON ADVISES THAT TREATMENT IS STOPPED OR SUSPENDED.	
5.	DEBORAH RICHMOND RESERVES THE RIGHT TO REFUSE TREATMENT TO ANY ANIMAL.	
6.	OWNERS ARE REQUESTED TO PROVIDE ADEQUATE RESTRAINT APPARATUS AND TO BE PRESENT AT ALL TIMES DURING THE ANIMAL'S TREATMENT SESSION.	
7.	DEBORAH RICHMOND RESERVES THE RIGHT TO USE VIDEO FOOTAGE AND PHOTOS TAKEN DURING TREATMENT SESSIONS.	
8.	DEBORAH RICHMOND DOES NOT TAKE ANY RESPONSIBILITY WHATSOEVER FOR ANY ACCIDENT/INJURY SUSTAINED BY THE ANIMAL'S HANDLER WHILST THE ANIMAL IS UNDERGOING MASSAGE TREATMENT.	