## SHELTER RELEASE TO VETERINARY CARE

The animal described below has been released from care at the Emergency Animal Care Center and will be transferred and cared for by the veterinary facility named below.			
ID #	LOCATION/PEN#		
ANIMAL DESCRIPTION:			
		PHONE:	
OWNER'S ADDRESS:			
MEDICAL TREATMENT PROVIDED	D TO ANIMAL:		
TREATMENT PROVIDED BY:			
NAME OF VETERINARY FACILITY	:		
ADDRESS:			
PHONE:(Business)		(01)	
(Business)	(Emergency/after hours)	(Other)	
agrees to provide humane care, ade and agrees to hold harmless all pers	hereby acknowledges receipt of the above equate shelter, and food to this animal who ons, organizations, or government agencie the animal's owner agrees to be respons ng the foster care period.	ile in his/her foster care; is involved in the rescue,	
VETERINARY FACILITY SIGNATU	RE: C	ATE:	
VETERINARY FACILITY PRINT NA	ME:		
OWNER'S SIGNATURE:	C	DATE:	
OWNER'S PRINT NAME:			
EMERGENCY ANIMAL CARE CEN	TER STAFF SIGNATURE:		
STAFF PRINT NAME:	D/	ATE:	
SIGN IN TRIPLICATE			
COPY TO (circle): OWNER	VETERINARY FACILITY EMERGEN	CY ANIMAL SHELTER	