

VET CONSENT FORM

Because you care... We'll be there

By completing this form, it is acknowledged that I/ we wish to have my/ our beloved pet
Individually Cremated at:

Pets R.I.P Pet & Equine Crematorium, Toowoomba and Ipswich.

Pet's Name:			
Age:	Sex:	Breed:	
Owner's Name:			
Address:			
Phone Number:			
Mobile Number:			
Veterinary Practice:			

Owner's Signature: _____ **Date:** _____

Please give your completed form to your Vet or Vet Nurse upon arrival at the Veterinary Practice.

If you have not already contacted Beric & Sue Lees and the Pets R.I.P team, please advise the Veterinary staff to do so on your behalf.

Thank you for entrusting our firm and for allowing us to serve you with our guarantee that all cremations are conducted in the same manner as the human cremation process – strictly individual and dignified.



PETS R.I.P

Beric & Sue Lees

LOCATED TOOWOOMBA AND IPSWICH

PH: 1300 233 007 or 1800 PETS RIP

(Emergency Calls After 6pm & Sunday)

EMAIL: info@petsrip.com.au

WEB: www.petsrip.com.au

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Head Office: 12 Rocla Court, Toowoomba
Mon. – Fri. 9am to 3pm; Sat. 9am to 12pm