



PETS R.I.P.<sup>®</sup>

# VET CONSENT FORM

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:

**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.**

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.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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](mailto:info@petsrip.com.au)

WEB: [www.petsrip.com.au](http://www.petsrip.com.au)

Head Office: 12 Rocla Court, Toowoomba

Mon.—Fri. 9am to 3pm; Sat. 9am to 12pm