

Ark Animal Hospital

3076 Highway 14 ~ Millbrook, AL 36054
334-285-4210 ~ www.arkanimalvets.com

Request to Release Information

The record of your pet(s) are considered confidential information. In order for us to release the information contained in these records to a third party, we are required by law to obtain written consent from you, the owner of the pet.

This form must be presented to the receptionists at the front desk before we can fax any of your records to any facility, make copies of your records for any purpose, send records to other vet clinics, or change ownership or owner information of the pet.

Date: _____

I, _____, give Ark Animal Hospital

permission to release information on _____ to:

(Name of person/clinic we are releasing the information to)

Signature of Owner

Date

Delivery options: You may present this form in person, fax it to 334-285-4993, mail it to the above address, or email it to arkanimalvets@yahoo.com