



Serving NE Minneapolis since 1973

Photo Release Form

I hereby allow Pet Central Animal Hospital to use any photographs taken by Pet Central Animal Hospital staff of my pet and/or individual(s) named herein.

These photos may be utilized in Pet Central Animal Hospital print and/or electronic informational publications released to the general public.

For myself, my child, and my pet, I hereby waive and release any and all rights and claims for damages arising from the use of the photographs.

Pet(s)
name: _____

Owner's
Name: _____

Signature: _____ Date: _____

Your signature indicates you are 18 years of age or older and you have read and understand all contents of this release.