

Microchip Waiver

I fully understand that a physical exam is not being performed. I certify that to the best of my knowledge cat(s) | dog(s) is (are) healthy. I confirm that if I have any concerns or problems with said animals health which may relate to the microchipping procedure, they will be presented to Safe Paws prior to the implantation of the microchip.

By signing below, I agree to hold harmless and release from all liability Safe Paws, Pet Supplies Plus, and all their past, present or future officers, agents, volunteers, employees or assigns from any issues arising from implantation of this microchip or matters relating thereto.

Furthermore, I acknowledge that no proof of ownership of the cat(s) | dog(s) has (have) been confirmed during this microchipping process, and that the implantation of the microchip is being performed for future identification purposes only. "Lifetime Registration" of the animal under the terms of this waiver does not provide definitive proof of ownership. I am however, either the owner of the animal or legally permitted to provide my contact information for the identification purposes.

| Name of animal | (s): | | | | |
|------------------------|-------------------|---------|------|--------|--|
| Type: Cat Dog | Sex: M F | Weight: | Age: | Breed: | |
| Your Name: | | | | | |
| Address: | | | | | |
| Email address: _ | | | | | |
| Phone Number: | | | | | |
| Microchip tag: | | | | | |
| Print Name | | | | | |
| Signature | | | D |)ate | |