

Chiropractic Clearance



To whom it may concern,

I(Owner) _____, would like to have my animal (Pet) _____
receive Chiropractic Care.

Its is my request, as the legal owner of the animal to have Chiropractic Care rendered by a professional that I
choose who is **Licensed in Animal Chiropractic**, compliant and in good standing with the **State Law of
Colorado** set forth by **DORA**.

Owner _____

Pet: Age: _____ Breed: _____

Veterinarian: _____

Address: _____

Telephone: _____

Fax#: _____

E-mail: _____

Preferred Method of Text Notes Received (Please Circle)

Mail Fax Email