



Fairview Animal Hospital, Inc.  
2784 E. Atlanta Road  
Ellenwood, GA 30294

**Waiver of Responsibility & Liability for Prescription(s) to be Filled by Internet Pharmacies, Catalog Vendors or Retail Stores**

Client's Name:

Pet's Name:

I hereby request a prescription for medication(s) or vaccination(s) for my pet so that I can purchase these products from an internet pharmacy, catalog vendor or retail store (referred to hereinafter as "other sources". I have been informed that the following risks exist when I obtain these products from other sources:

1. Products obtained from other sources may be ineffective and/or harmful to my pet.
2. Products obtained from other sources may be counterfeit and may not have been approved by the appropriate governing authority.
3. Fairview Animal Hospital staff members are unavailable to teach you how to administer products obtained from other sources.
4. The number of tablets or capsules, milligram size of the unit, volume and/or concentration of liquid, and number of authorized refills may differ from that prescribed by your pet's doctor.
6. Manufacturer rebates that would be available for products obtained from a licensed veterinarian will not be available if obtained from other sources.
7. The manufacturer's warranties or guarantees for these products may not be valid. Manufacturers may not stand behind their products. Additionally, Fairview Animal Hospital will be unable to assist you in claims against the manufacturers.
8. Vaccines not administered by a licensed veterinarian may not be accepted by kennels, groomers, airlines, licensing agencies or veterinary practices.

I have read and understand the above and I accept the risks as stated above. I am aware that Fairview Animal Hospital does not accept any financial responsibility for any treatments required as a result of the use of products obtained from other sources. I agree to hold Fairview Animal Hospital harmless for any deleterious effects or lack of effectiveness of products purchased from other sources.

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Signature of Owner or Authorized Agent

\_\_\_\_\_  
Date