



Klinika dla Małych Zwierząt
Wąsiatycz sp. z o.o.
18 Księcia Mieszka I St.
61-689 Poznań
phone: 61 8 230 997
e-mail: repcja@klinwet.pl

Poznań,

Consent for procedure during hospitalization

I, the undersigned, hereby give my consent for the performance of the procedure
.....
on my animal of the breed age named,
who is a patient of the Inpatient Care Unit.

I have been informed of the cost of the procedure, which is

I knowingly accept the above amount and undertake to pay it.

.....
Owner's first and last name

.....
Owner's signature