



**VET CHECK RELEASE**

As part of our adoption process we may contact previous veterinarians used by the applicant. Any information obtained is used only for the purpose of processing applications, however, information regarding this application may be shared with other rescue groups and should not be considered confidential.

(Please print, using BLACK INK ONLY)

Applicant's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

I agree to the release of any information used for the purpose of processing my application and further agree to not hold my veterinarian responsible in the event that my application is denied.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_

.....  
(This section to be filled in by a representative of Appalachian Cat Rescue)

**Previous Pets Listed on Application:**

<u>Breed</u>	<u>Name</u>	<u>Age</u>	<u>Comments</u>

**Current Pets Listed:**

<u>Breed</u>	<u>Name</u>	<u>Age</u>	<u>Comments</u>

ACR CONTACT NAME: \_\_\_\_\_

ACR CONTACT PHONE NO.: \_\_\_\_\_