

Statement of Disclosure

I, **Amanda Bowers, Hands 4 Hooves LLC**, am not a veterinarian; I do not diagnose lameness, medical issues, offer medical advice, prescribe drugs nor perform surgery.

My role is that of facilitator, assisting your animal(s) to attain and maintain a naturally healthy state. The specific results of the bodywork sessions will be different for each animal: beneficial effects of massage and bodywork include circulation of blood and lymph, pain relief through endorphin release, increase trust and mood elevation, improved flexibility; body awareness, muscle efficiency, increased performance, shortened recovery from illness, injury or surgery, emotional calming and injury prevention.

Amanda Bowers, Hands 4 Hooves, LLC

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Consent & Acknowledgment of Treatment/Therapy

I have read and understand the above disclosure statement in regard to the treatment/ therapy to be given to my animal(s), _____ by **Amanda Bowers, Hands 4 Hooves, LLC**.

I understand that **Amanda Bowers, Hands 4 Hooves, LLC** is not a veterinarian, that the therapy is not to be considered as veterinary medical treatment, and that comments, suggestions or recommendations proffered in the course of this treatment/therapy are not to be construed as veterinary medical advice. Bodywork/touch therapy and other holistic modalities are not a substitute for veterinary medical care, but rather a cooperative form of treatment.

I _____ (owner or agent of the owner), wish to have this complimentary therapy for my animal(s) and give my consent and acknowledgment by signing below, in compliance with the veterinary practice acts of Minnesota, Maryland, Virginia and West Virginia.

I _____ (owner or agent of owner) certify that my animal(s) has(ve) received regular veterinary care and vaccinations as needed.

I _____ (owner or agent of owner) certify that my veterinarian has given permission for **Amanda Bowers of Hands 4 Hooves, LLC** to give bodywork and complimentary therapy(ies) to my animal(s).

I _____ (owner or agent of owner), understand that I must give 24 hours advance notice to cancel appointment or payment will still be required in full.

In signing this document, I acknowledge that I have read and fully understand the previous statements and consent to **Amanda Bowers, Hands 4 Hooves, LLC** performing bodywork and/or other complimentary modalities on my animal(s). I understand that I am waiving any and all claims I may have against **Amanda Bowers, Hands 4 Hooves, LLC**.

Owner/Agent Name (printed): _____

Signed: _____ Date: _____