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**VETERINARY MEDICAL RECORD RELEASE FORM**

I hereby authorize \_\_\_\_\_  
to release my animal's medical records to the **Baddeck Veterinary  
Clinic.**

**Client's name(please print):** \_\_\_\_\_

**Pet's name(s):** \_\_\_\_\_

**Client's signature:** \_\_\_\_\_

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