

# Blue SKIES

# **Owner Consent to Perform Physiotherapy Treatment**

#### **Owner Name:**

#### **Animals Name:**

#### Permission to treat:

I give my consent for my animal (named above) to receive Veterinary Physiotherapy treatment from a fully insured and qualified Veterinary Physiotherapist at Blue Skies Veterinary Physiotherapy. I give your permission for the Veterinary Physiotherapist to discuss treatment with your veterinarian and understand that the Veterinary Physiotherapist may refer your animal back to the Veterinarian if needed. By signing this consent form, I agree to Blue Skies Veterinary Physiotherapy's terms and conditions on their website.

## **Data Protection:**

The personal information you have provided will be held and used by Blue Skies Veterinary Physiotherapy in accordance with the Data Protection Act 1998 and the General Data Protection Regulation 2018. We will use your information to contact you on any matters relating to your animals' treatments and sessions. Data will only be shared with the patient's owner and Veterinary Practice the patient is registered with.

## Social Media:

I consent to images of my animal to be used on Blue Skies Veterinary Physiotherapies social media pages and website. No personal data will be published other than patients' name, treatment provided and pathology.

Yes / No

Signature: