



1986 Lincoln Way E. Chambersburg, PA 17202 717-264-2615

## Prescription Medication Liability Waiver

Clients Name \_\_\_\_\_

Animals Name \_\_\_\_\_

Medication Name \_\_\_\_\_

I understand that the medications purchased from an online source may not be a legitimate medication. I also understand that the efficiency of the medication may be altered due to possible improper handling during storage or shipment. I agree that by purchasing prescription medications from an online resource, I am releasing Lincoln Way Animal Hospital, its veterinarians and its staff, of all liability.

Signature \_\_\_\_\_

Employee \_\_\_\_\_