



Helena Veterinary Service

For Happy and Healthy Pets

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www.helenavets.com

DIGITAL RADIOGRAPH RELEASE FORM

I hereby authorize Helena Veterinary Service to release radiographs of my pet by:

- CD copy of my pet's radiographs; or,
- E-mail copy of my pet's radiographs to either:

a. Myself at the following e-mail address:

_____ ; or,

b. Dr. _____ at

_____ Hospital or Clinic.

Reason for request:

Pet's Name _____

Signature of Owner or Agent _____ Date: _____

Signature of H.V.S. Doctor _____ Date: _____

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C/D COPY

E-MAIL COPY TO: _____ Date: _____