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PRE PURCHASE EXAMINATION REQUEST FORM

Purchaser	· Name:	Horse's Name:
Address:		
Mobile:		Age/Breed/Colour:
Email:		
। McLaren Va	ale Equine Veterinary Services to carry out (tick a	(Name of Purchaser*) authorise ppropriate box*):
	Basic Veterinary Assessment (\$165.00) – Hors Clinical examination Lameness assessment at the walk an	•
	2 Stage Pre-Purchase Examination (\$295.00) Full clinical and structural examination Lameness assessment at the walk an	on Id trot in a straight line with flexion testing
	 5 Stage Pre-Purchase Examination (\$385.00) Full clinical examination Lameness assessment at the walk an Lameness assessment on the lunge + Re-assessment of clinical parameters 	
•	the follow additional procedures to be performent and understand additional charges will apply (
	Radiographs – Area(s) of concern:	
	Endoscopic examination of airway	
	Breeding soundness examination: Mare / Filly	,

	<u>ndor:</u>
Name:	
Address:	
Ph:	
Date and Tin	ne of Examination:
Consent to S	edation for addition procedures (if required) \square
Credit Cai	rd Details
Name on Car	d:
	/ CVV (last 3 digits on back of card):
Signature: _	
l understar	nd that if I cancel the examination less than 24 hours before the scheduled time a \$50.00 cancellation fee will be deducted from the refund amount.
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