

VETERINARY HEALTH FORM

MEDICAL DEPARTMENT

MONDAY TO FRIDAY: SATURDAY TO SUNDAY: EMAIL:

6 a.m. – 10 p.m. ET 6 a.m. – 8 p.m. ET acmedical@aircanada.ca

TEL: 1-800-667-4732 (Toll-free from North America) FAX: 1-888-334-7717 (Toll-free from North America) 1-514-369-7039 (Long distance charges apply) 1-514-828-0027 (Long distance charges apply)

To ensure an efficient process, please complete and submit the following **three** (3) forms to acmedical@aircanada.ca at least 96 hours in advance of travel:

- Acknowledgement and Confirmation of Behaviour Form
- Medical/Mental Health Professional Form
- Veterinary Health Form

Please ensure to keep the completed original forms with you at all times while travelling.

Please note that should the forms not be provided at least 96 hours in advance of travel, your emotional support dog may be refused travel at the airport.

This form must be:

- I. Completed by a veterinarian;
- II. Dated within two months of your departure date, unless a shorter period is required by local law.

PASSENGER INFORMATION					
SURNAME	FIRST NAME				
DATE OF BIRTH	BOOKING REFERENCE				
TELEPHONE	EMAIL				





Please note: The following sections need to be filled out by a veterinarian. You can either save and send the form electronically or print it to be filled out by hand. Duly completed forms must be emailed to acmedical@aircanada.ca

DOG INFORMATION								
PASSENGER SURNAME			FIRST NAME					
DOG'S NAME			BREED					
AGE (MUST BE 10 WEEKS OF	R OLDER)	WEIGHT	IGHT			HEIGHT		
WIDTH (SHOULDER TO SHOULDER)			LENGTH (NOSE TO TAIL)					
		VETERINA	RY INF	FORMATION				
NAME			NAME OF PRACTICE					
ADDRESS				TELEPHONE				
LICENCE NUMBER	DATE LIG	CENCE ISSUED PROVINCE/STA			E WH	IERE LICENCE ISSUED		
DATE DOG WAS LAST EXAMIN	NED	DATE OF RABIES VACCINE		CINE	VACCINATION EXPIRY DATE			
I confirm that I have examined the dog and based on my examination, I have no knowledge of any inappropriate behaviour exhibited by the dog, including aggressive behaviour, excessive whining or barking, or causing injury to others.								
I confirm that I have examined the dog and based on my examination, it appears to be free of infectious or contagious disease, and ticks and fleas that would endanger other animals or public health.								
I confirm that the dog is current as of the date of this form with all required vaccines.								
I confirm that I have examined the dog and based on my examination, the dog will fit comfortably in an animal carrier under an aircraft seat.								
SIGNATURE						DATE		

SUBMISSION OF THESE FORMS INDICATES CONSENT WITH AIR CANADA'S PRIVACY POLICY. Other documentation may be required for travel entering or exiting an international destination.

CLEAR FORM 2