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I am of legal age and have read the foregoing and fully understand the contents thereof. Sign on appropriate line(s).

Signature Miching T. Print name TANIN THAMRONGVITHAVATPONG

Parent/Guardian signature _____ on behalf of _____
(for subjects under age 18) (child's full name)

College of Veterinary Medicine client signature _____ on behalf of _____
(animal's name or description)