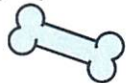


# Little Veterinarian School® Elementary

*Shaping the future of medicine.*



Little Veterinarian School® INSPIRES Elementary children to role play and explore the exciting world of Veterinarians. Using interactive demos, crafts and games, kids learn how to take care of a pet and use instruments that real Veterinarians use. Each student will take home their own stuffed animal dog that they will adopt along with dog body language poster, eye model, radiographs, dog anatomy poster, white coat and more!



Our proven curriculum is FUN, EXCITING and EDUCATIONAL. Your child will learn to love pets and take care of pets!



**REGISTER NOW!**

*Lessons include:*

- Who are the important members of the Vet clinic?**
- Why do we take radiographs of our dogs and how to do it?**
- Understand how my dog digests food.**
- Learn different parts of the eye and understand eye troubles for dogs.**
- Learn common dog body language and know how my pet is feeling.**
- Graduation!**



School: Liholiho Elementary School K-5th (Breeze way) Dates: 1/30 - 4/24 (no class 3/20)

Day & Time: 1.40pm - 2.25pm Wednesday Tuition & Supply Kit: \$240 (12 classes)

Supply Kit includes WHITE stuffed dog, dog anatomy poster, body language poster, eye model, white coat and more!

Enroll and Pay online at [littlemedicalschoo.com/Oahu](http://littlemedicalschoo.com/Oahu) or send payment to **1893 Alaweo St. HNL HI 96821**

Student Name: \_\_\_\_\_

Email (must have): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Class: \_\_\_\_\_

Allergy: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone No: \_\_\_\_\_

Date: \_\_\_\_\_

Your signature acknowledges that you agree to the waiver and policies listed below. I hereby give consent to Little Medical School Oahu (LMSO) for my child to participate in this program. This agreement releases LMSO from all liability relating to injuries that may occur by using stethoscope, mortal and pestle, blood pressure cuff, or any equipment used in classes. By signing this agreement, I agree to hold LMSO entirely free from any liability including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence. In case of emergency involving my child, I give permission for the School Program staff to seek emergency medical treatment for my child and act as guardian in permitting medical treatment if unable to reach me. I understand that all emergency and/or medical costs are my responsibility. I do hereby consent and agree that LMSO has the right to take photographs of my child to use these photos on company website ([littlemedicalschoo.com/oahu](http://littlemedicalschoo.com/oahu)), company Facebook pages and promotional material without compensation. By signing this enrollment form, I forfeit all rights to bring a lawsuit against LMSO for any reason.

Register at [littlemedicalschoo.com/Oahu](http://littlemedicalschoo.com/Oahu) or call **808-639-7572**  
Follow us [facebook.com/littlemedicalschoooloahu](https://www.facebook.com/littlemedicalschoooloahu) | [sue@littlemedicalschoo.com](mailto:sue@littlemedicalschoo.com)