

**ANIMALS FIRST VETERINARY SERVICE
CLIENT INFORMATION**

Thank you for entrusting us to care for your pet(s). So that we may be better able to meet your needs, please complete the following:

First Name _____ Middle initial _____ Last Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ E-mail _____

Employer _____ Work Address _____ Work Phone _____

All Fees are due upon completion of veterinary services.
Financial Responsibility Agreement

I understand that interest at the rate of 5% per month will be charged on any past due amounts. A \$55.00 charge will be assessed for any returned checks. If collection proceedings are initiated for any past due amounts, Client agrees to pay reasonable attorney fees, which shall be deemed to be 35% of the past due amount, with a minimum attorney fee of \$250. If it is necessary for us to engage the services of an attorney in regard to any violations or disputes regarding any other terms of this Agreement, the Client will be responsible for all of said attorney's fees and costs. The undersigned hereby waives the benefit of the homestead exemption with regard to this transaction. The Company is hereby given, and hereby retains, a lien on the clients files and documents, to the extent of any unpaid balances owed to Company by Client. If client elects to save a card on file with Animals First Vet, we reserve the right to charge any remaining balances without direct contact of client past 30 days. We will send a revised statement to clients provided email address. We reserve the right to amend the terms of this contact in the future.

For contact via phone whether a voice call or text messaging, standard rates apply in accordance to contract with phone provider.

Privacy Agreement

I understand that Animals First may publish information about my pet(s), possible accompanied with a photograph, in their newsletter or other publications for learning purposes without prior notification. Should I choose not to allow this, I will need to notify the staff at Animals First Vet promptly.

Print Name _____ Signature _____ Date _____

Would you like to receive our Newsletter to your email address listed above?

Animal's Name _____ Gender _____ Breed _____

Date of Birth _____

Reason for Visit _____

Animal's Name _____ Gender _____ Breed _____

Date of Birth _____

Reason for Visit _____