

# WILLOW CREEK

## P E T • C E N T E R



**Client Information**

Name \_\_\_\_\_  
*Last*
*First*
*Middle*
*Spouse*

Address \_\_\_\_\_  
*Street*
*Apt.#*
*City*
*State*
*Zip*

Phone Numbers \_\_\_\_\_  
*Home*
*Cell*
*Pager*

E-Mail Address \_\_\_\_\_ Referred by \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone # \_\_\_\_\_

Employer (Spouse) \_\_\_\_\_ Work Phone # \_\_\_\_\_

Driver's License # \_\_\_\_\_ Social Security # \_\_\_\_\_

Credit Card # \_\_\_\_\_ (circle one) MC VISA AMEX DISC

**Pet Information**

Dog	Cat	Other	Name	Breed	D.O.B.	Description	Diet	Sex	Spay / Neuter

**Permission to Treat Pet(s) / Payment Agreement**

I certify that I own the above described animal(s) and I do hereby consent and authorized Willow Creek Veterinary Hospital, Dr. Campbell, and his associates, staff or veterinarians, to board or hospitalize it and to administer any vaccinations, medications, tests, surgical procedures, or treatments that the doctors deem necessary for the health, safety, or well-being of the animal while it is under their care and supervision. I realize that my pet will be discharged only during regular office hours and the fee, or fees due its care will normally be paid in full at that time.

I understand that Willow Creek Pet Center ("WCPC") will use reasonable care toward my animal while it is being boarded and/or treated. However, I acknowledge, that there exists a possibility that my animal may become ill or may be injured while at WCPC, and that it may injure itself, refuse food, urinate or defecate on itself, or even die while in the care of WCPC. I hereby release and hold harmless WCPC (including Dr. Campbell, all veterinarians, staff and employees) from and for all liabilities, claims and/or causes of action, arising out of or resulting from WCPC's care, treatment, and/or boarding of my animal, including, but not limited to, claims of negligence, veterinary malpractice, and/or bailment. I understand further that this release of all claims does not apply to claims of willful, wanton or reckless conduct or claims of gross negligence.

If I neglect to pick up the animal within 5 days of written notice that it is ready for release, you may consider the pet abandoned and dispose of it as you see fit. I do, however, in that event, agree to pay all charges incurred for its care until it is disposed of, including disposal.

All arrangements of credit shall be made at the time this Animal Release is signed. In the event no prior credit arrangements have been made, all fees shall be paid in full as services are rendered at the time the animal is released. Any fees not paid for within 30 days shall be subject to a finance charge of 1-1/2% per month (18% per annum).



I agree to assume all interest, attorney's fees and costs of court resulting from default of payment of any charge incurred for the care of any animal that I bring in on this or any future date and for any legal fees, costs, and expenses incurred by WCPC to enforce the terms of this contract. In the event that I change my plans, become ill, change my address, or otherwise lose contact with the hospital, it shall be my duty to inform Willow Creek Veterinary Hospital in writing immediately of such changes.

I CERTIFY THAT I HAVE READ THE FOREGOING, THAT I UNDERSTAND THE PROVISIONS THEREOF AND THAT I AGREE TO ABIDE BY SUCH PROVISIONS AND THAT THEY SHALL APPLY TO ANY AND ALL ANIMALS THAT I MAY BRING IN ON THIS OR ANY FUTURE DATE.

Date \_\_\_\_\_ Signed \_\_\_\_\_ Spouse \_\_\_\_\_