

Clinic Policies

Ownership Policy:

We recognize ownership to the undersigned person. Any changes in ownership must be authorized by the recognized owner or their estate. The recognized owner assumes financial responsibility for the established account as well as responsibility for medical decisions. If there is more than one owner, a separate clinic policy form must be filled out by that owner. A recognized owner may authorize someone else to authorize treatment (see below).

Privacy Policy: We respect your privacy. We release vaccine records to Winnebago County Animal Services, veterinary clinics, adoption, boarding, and grooming facilities. If you need your pet's medical records, we request 48 hours notice. We will email or fax the last years record or you may pick up a full paper copy for a small fee.

I authorize the following individuals access to the following information:

Name	Medical Decisions	Medical Information	Financial Information	Pick-Up

Emergency Policy:

In an emergency we will perform procedures to save your pet's life and relieve suffering or pain as best our veterinary staff believe reasonable. The owner is responsible for charges incurred.

Housing Policy:

We require all pets held at Mostly Cats for any length of time to be current with basic healthcare consisting of a current physical exam, rabies, and distemper vaccines or a veterinarian waiver, and be free from parasites. If the pet does not meet our basic health standards we will provide service and bill the owner at our regular rates.

Payment Policy:

Payment in full is due at the time of service. We accept cash, check, MasterCard, Visa, Discover, American Express, and CareCredit. Any unpaid balance for any reason is subject to a monthly service charge and billing charge. Any returned check is subject to a \$25 returned check fee and is due immediately.

Should I default on payment, I agree to pay reasonable attorney fees, collection agency fees of 30% and court costs.

Acceptance of Clinic Policies: I am over 18 years old. I understand the ownership, privacy, emergency, housing, and payment policies, and I accept them.

Signed

Date