



Your name: _____

Address: _____ Apt # _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Alt. Phone: _____

Email: _____

Second Account Holder/ Contact Information:

Name: _____ Phone: _____

How did you hear about us? Google Yelp Website Magazine Referral _____

Other _____

PET INFORMATION

Pet's name: _____ **Age/ D.O.B.** _____

Dog/ Cat: _____ **Breed:** _____ **Coat Color:** _____

Male or Female _____ **Spay/ Neuter:** _____

Pet's name: _____ **Age/ D.O.B.** _____

Dog/ Cat: _____ **Breed:** _____ **Coat Color:** _____

Male or Female _____ **Spay/ Neuter:** _____

Pet's name: _____ **Age/ D.O.B.** _____

Dog/ Cat: _____ **Breed:** _____ **Coat Color:** _____

Male or Female _____ **Spay/ Neuter:** _____

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**ALL PAYMENTS ARE DUE AT THE TIME OF SERVICES RENDERED. WE ACCEPT CASH, CHECKS, ALL MAJOR CREDIT CARDS, & CARE CREDIT WHICH CAN BE APPROVED IN AS LITTLE AT 10 MINS.**

**NO REFUNDS ARE AVAILABLE ONCE GOODS AND SERVICES ARE TENDERED.**

**I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND AGREE TO ALL TERMS THEREIN.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



2717 ROCKYRIDGE DR.  
HOUSTON, TX 77063

### Mission and Financial Policy

Thank you for choosing Tanglewilde Veterinary Clinic for your family's pet care. Our primary mission is to deliver comprehensive, high-quality veterinary care for your pet. An important part of the mission is making the cost of optimal care as easy and manageable for our clients as possible by offering several payment options.

Tanglewilde Veterinary Clinic requires payment in full at the end of your pet's examination and/or at the time of discharge.

### Payment Options:

You may choose from

- Cash, check, Visa, MasterCard, American Express or Discover Card
- Convenient monthly Payment Plans from CareCredit,
  - Can be used repeatedly for your entire family without having to reapply (eligibility for CareCredit is subject to credit approval).
- Scratch Pay loans
  - Can be used per-treatment plan problem (no "hard" credit check)

### Deposit and Unpaid Balances:

For some treatments or hospitalized care, a deposit may be required. Healthcare plans requiring comprehensive care of more than \$500 will require a 50% deposit to begin treatment. The balance is due at time of discharge. Any unpaid balances are immediately subject to 5% interest. Accounts over 30 days past due will be subject to collections.

### Additional Policy Information:

Tanglewilde Veterinary Clinic offers no refunds on goods or services.

Tanglewilde Veterinary Clinic charges \$25 for returned checks.

For clients with pet insurance, we are happy to provide you with the necessary documentation to submit a claim to your insurance carrier.

If you have any questions, please do not hesitate to ask. Thank you for allowing us to care for your pet.

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Client Signature

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Date