

Bastrop Veterinary Hospital New Client Form

Thank you for giving Bastrop Veterinary Hospital the opportunity to care for your pet(s). So that we may become better acquainted, please complete the following:

CLIENT INFORMATION

Date: _____

Name: _____ Spouse's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Cell #: _____ Work #: _____ Home #: _____

Spouse Cell #: _____ Spouse Work #: _____

Email address: _____

All fees are due at the time services are rendered

Please indicate choice of payment: Cash / Check / Visa, MasterCard, Discover, Amex, Care Credit

Texas Driver's License #: _____ DOB _____ Place of Employment _____

Social Security Number: _____

ALL unpaid accounts are subject to a 28% collection fee.

By signing, I agree to the terms of payment on my account.

Signature X _____

	Pet #1	Pet #2	Pet #3
NAME			
BREED			
DOB/AGE			
COLOR			
GENDER			
SPAYED/NEUTERED	Y / N	Y / N	Y / N

Bastrop Veterinary Hospital

P.O. Box 625 | Bastrop, TX 78602 | 512-321-5386 | fax 512-321-6994

Financial Policy

Thank you for choosing Bastrop Veterinary Hospital. Our primary mission is to deliver the best and most comprehensive veterinary care available for your pet or horse. 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. Bastrop Veterinary Hospital requires payment in full at the end of your pet or horse’s examination and/or at the time of discharge.

Payment Options:

You can choose from:

- Cash, Check, Visa, MasterCard, American Express, or Discover Card
- Convenient monthly payment plans through CareCredit
 - Allows you to begin treatment today and pay over time
 - Available for any treatment amount
 - Can be used repeatedly – for your entire family – without having to reapply

Deposit & Billing:

For some treatments or hospitalized care, a deposit may be required. For healthcare plans requiring comprehensive care of more than \$500, it will be required a 50% deposit to begin your pet or horse’s treatment. We may offer in-house payment options on a case-by-case basis. All outstanding balances will receive a monthly fee. If you have an account 90 days past due, Bastrop Veterinary Hospital may relinquish your balance owed to a collection agency or small claims court.

Additional Policy Information

Bastrop Veterinary Hospital charges \$30 for returned checks. For clients with pet or horse insurance, we are happy to provide you with the necessary documentation to submit a claim to your insurance carrier.

If you have any doubt about how you intend to pay for services, we encourage you to discuss fees with your provider before those services are performed.

If you have any questions, please do not hesitate to ask. We are here to provide the best veterinary care available to your pet or horse.

By signing below, you agree to the foregoing terms of payment:

Client/Owner Signature Date

Client/Owner Name (Please print) Social Security Number Date of Birth

Texas Driver License #, Expiration Pet/Horse Name Breed