

Loudoun Veterinary Service, Inc.

1043 East Main Street,

Purcellville, VA 20132

540-338-7118

540-338-6258 Fax

loudounvet@verizon.net

New Client Paperwork

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

CELL # _____ **CELL #** _____

EMAIL _____

Preferred Method of Communication? Text - Email - Postcard

How did you hear about us? _____

*At Loudoun Veterinary Service, Inc. we are continually striving to provide the highest quality care for your animal while minimizing the cost of services. To help us accomplish this goal, **full payment is due at the time services are provided.***

INITIAL _____

CREDIT AGREEMENT

In consideration for the professional veterinary services to be rendered, I hereby agree to be fully responsible for and promptly pay any bill, in full, for those services. Including but not limited to; physical examinations, surgeries, medication, lab fees, radiology and/or any other work performed for me and my pet(s) or on my/their behalf by Loudoun Veterinary Services, Inc.

INITIAL _____

We will gladly prepare an estimate upon request. All fees are due at the time services are rendered, and a deposit may be required before services are performed. We accept cash, checks, Visa, MasterCard, Discover, and Care Credit. We reserve the right to charge a fee for missed appointments or appointments that are canceled with less than 24 hours' notice.

I understand that any balance due must be paid at discharge. I am also responsible for an additional fee if a check is returned due to insufficient funds or an invalid account. In the event that this account is referred to an attorney for collection, whether or not a suit is brought, the undersigned agrees to pay any and all costs associated therewith, including attorney's fees of 33% of the outstanding balance due, together with interest thereon at the rate of 18% per annum. You must be 18 years or older to assume financial responsibility for a pet.

INITIAL _____

I agree that in the event of any dispute that the venue shall be proper courts of Loudoun County, Virginia and that I shall not object to that venue.

INITIAL _____

SIGNATURE DATE _____ **CLIENT**

SIGNATURE DATE _____ **CLIENT**