

north

road veterinary centre

Pet Health Club Application

Please complete and sign the form below, the standing order mandate and a copy of the terms and conditions and return them to the surgery.

Owner Details

Mr/Mrs/Miss/Ms _____
Surname _____
First Name _____
Address _____

County _____
Postcode _____
Telephone _____
Mobile _____
Email _____

Animal Details

Animal Name	Dog/Cat/Rabbit	Monthly Fee		
_____	_____	_____	Cat	£9.25
_____	_____	_____	Dog Under 4kg	£9.50
_____	_____	_____	Dog 4-10kg	£10.00
_____	_____	_____	Dog 10-25KG	£11.25
_____	_____	_____	Dog 25-40KG	£13.70
_____	_____	_____	Dog Over 40kg	£19.50
			Rabbit	£7.40
	Total	_____		

Signature

Date

Office Use

Staff Initials _____
Client Ref No _____
1st payment date _____
SO Mandate Sent _____
On records _____



New Standing Order Instruction

Please complete this form in BLOCK CAPITALS and in black ink

To _____ Bank

Please set up the following Standing Order and debit my/our account accordingly

1. Account details

Account name _____ Account number

Account holding branch _____ Sort code

2. Payee details

Name of person or organisation you are paying

Payment reference (if known) - this will appear on the bank statement of the person or organisation you wish to pay

Sort code - the bank code of the person or organisation you are paying

Account number - the account number of the person or organisation you wish to pay (Eight digits - if less place zeros at the front)

3. About the payment

How often are the payments to be made

Weekly	<input type="checkbox"/>	Two weekly	<input type="checkbox"/>	Four weekly	<input type="checkbox"/>	Monthly	<input checked="" type="checkbox"/>
Quarterly	<input type="checkbox"/>	Half yearly	<input type="checkbox"/>	Yearly	<input type="checkbox"/>		

Amount details

Date and amount of first payment (please allow 3 working days for receipt) £

Date and amount of ongoing payments (if different from the first payment) £

Choose one of the following two options

1. Date and amount of final payment £

2. Until further notice (payments will be made until you cancel this instruction)

4. Confirmation

Customer signature(s)

Date _____

Pet Health Club

Terms and conditions

Practice Copy

Fees

- Payment is made by monthly standing order.
- The monthly payment amount is dependant upon the species of animal and, in the case of dogs, on the bodyweight.
- The monthly payment amount is fixed for a period on 12 months from the inception of the scheme except in the circumstances below. If, at the end of 12 months, the fee changes you will be notified by us.
- If the weight of your pet changes such that they fall into a different weight band then an appropriate increase/decrease in the monthly fee may be appropriate. A change in the statutory VAT rate may result in a change in the monthly fee

What is covered

- The Pet Health Club is a regular payment plan to spread the cost of routine vaccinations and parasite control over 12 months. Based on our normal treatment recommendations the total payment per year is approximately 10% year less than if vaccinations/parasite control were paid for at the time.
- A 10% discount will be given on 'non-core' vaccinations (see below), over-the counter medications, food (excluding special offers), dental treatment and neutering. A £5.00 discount will be given on microchipping.
- Consultation fees and fees for the investigation and treatment of illness and injury are not included in the Pet Health Club. This should not be seen as a substitute for pet health insurance which we recommend in addition to the Pet Health Club.

Start of cover

- Discounts on 'non-core' vaccinations, over-the counter medications, food (excluding special offers), dental treatment, neutering and microchipping will be given as soon as your pet is enrolled in the Pet Health Club
- Routine parasite control will be provided at no extra charge once your pet has been enrolled on the Pet Health Club for 1 month. Before this time we will give a 10% discount on any parasite treatments purchased. Any parasite treatments purchased in addition to our normal recommendations will also be given a 10% discount.
- Routine vaccinations will be provided at no extra charge once your pet has been enrolled on the Pet Health Club for 3 months. Before this time we will give a 10% discount on routine vaccinations.

Included vaccinations

- Dogs will receive annual booster vaccination against para-influenza and leptospirosis plus vaccination against distemper (hard pad), parvovirus and infectious canine hepatitis (adenovirus) at the frequency specified by the vaccine data sheet. It does not cover the cost of primary vaccination courses although a discounted price will be charged if this is required.
- Cats will receive annual booster vaccination against calicivirus, herpesvirus, feline panleucopaenia and feline leukaemia virus. It does not cover the cost of primary vaccination courses although a discounted price will be charged if this is required.
- Rabbits will receive annual vaccination against viral haemorrhagic disease and bi-annual vaccination against myxomatosis.
- 'Non-core' vaccinations may be given in certain circumstances but you will be charged 90% of the standard price for these. Examples include kennel cough vaccination for dogs or rabies vaccination for animal travelling abroad.

Routine parasite control

- We stock a range of treatments for flea and worm control and can discuss which are most suited to your pet's need. Typical treatment recommendations are below, although we reserve the right to alter these in light of new products or changing parasite risks.
- Dogs will receive one of the following combinations. Advocate monthly plus Droncit once or twice annually; Frontline Combo every 2 months plus Drontal Plus/Milbemax four times yearly; Program Plus monthly plus Droncit once or twice annually.
- Cats will receive one of the following combinations. Advocate monthly plus Droncit once or twice annually; Frontline Combo every month plus Drontal Cat/Milbemax four times yearly; Program Injection twice yearly plus Drontal Cat/Milbemax four times yearly.
- Rabbits will receive Panacur Rabbit or Lapizole twice yearly plus Rear Guard once yearly.
- Additional parasite control is not normally required. If, in exceptional circumstances, extra treatment is required a 10% discount will be given on the cost of these products.

Cancellation

- You are able to cancel your membership at any time to the Pet Health Club. If you wish to do so please provide us with 28 days notice.
- If you cancel within 14 days of signing up then any money paid to us will be refunded to you although we will deduct the amount of any discounts that you have received. If the discounts exceed payments made to us you will need to pay us the balance.
- If you cancel after 14 days of signing up we will refund payments made to us since the start of the policy year minus the full cost of any included medication or treatments and any other discounts that you have received during that time. We will also charge a £2.00 administration fee. If these costs exceed payments made to us you will need to pay us the balance.
- At the end of each 12 month period, unless otherwise notified by you, we will assume that you wish to continue membership of the Pet Health Club. Your monthly standing order will continue. We will notify you if the payment amount will change.
- If, at the end of each 12 month period, you choose not to continue the Pet Health Club membership then no costs will be charged to you but you will not receive any refund.

Missed Payments

- If you miss any payments these must be paid to us in full to continue benefiting from the discounts on the Pet Health Club.
- If you fail to make up the missing payments then your membership will be cancelled. We will refund payments made to us since the start of the policy year minus the full cost of any included medication or treatments and any other discounts that you have received during that time. We will also charge a £2.00 administration fee. If these costs exceed payments made to us you will need to pay us the balance.

Client Name _____ Signed _____ Date _____

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