



Family Pet Practice/Wixom Family Pet Practice

PUPPY PREVENTION PLANS

Guidelines & Contract

Services below are covered fully during the year enrollment:

- Puppy BASIC 50 Plan** includes: 2 Routine Exams, 1 Rabies Vaccine, 1 Distemper Vaccine, 3 Distemper/Lepto Combo Vaccines, 1 Bordetella Vaccine, 1 Heartworm/Tick Test, 2 Fecal Tests, 1 Microchip.
- Puppy PREMIUM 110 Plan** includes: 2 Routine Exams, 1 Rabies Vaccine, 1 Distemper Vaccine, 3 Distemper/Lepto Combo Vaccines, 1 Bordetella Vaccine, 1 Heartworm/Tick Test, 2 Fecal Tests, 1 Microchip, 1 Preoperative Blood Panel, 1 Routine Spay/Neuter.

During enrollment, your pet will also receive:

- 15% Off Heartworm Medication
- 15% Off Flea/Tick Medication
- that are dispensed within the clinic
- 15% Off Lyme & Influenza Vaccines

_____ (initial) The Prevention Plans are not medical insurance or savings plan. They are a Plan to provide routine preventive care in a budgeted manner.

_____ (initial) The Enrollment period expires one year from the date of Registration and automatically expires, as do the payments & benefits.

_____ (initial) The Initial Registration Fee processes the day of enrollment, then the first of 12 monthly payments will process the day following enrollment.

_____ (initial) If the Subscriber cancels after any services are rendered, the Provider retains the Registration Fee and the Subscriber is to pay the full amount of standard prices of services rendered under the Plan.

_____ (initial) If a payment is declined, it must be paid in the office. You will receive notification via the email you have provided. We do not have access to your financial information once it is entered into the secure payment system.

_____ (initial) Routine Spay/Neuter covered in Plan. Additional fees will apply for cryptorchid, hernia, in heat, extra anesthesia, sedatives, or optional items such as gastropexy, anti-nausea medication, etc.

_____ (initial) Prevention Plans do not cover any services rendered through outside veterinarians or any fees for services recommended as a result of illness or accidental injury.

Plans include only what is shown at the top of contract. Registration Fee will be waived with Plan renewal, as long as it is within 30 days of the expiration. The Provider reserves the right to adjust monthly fees on any Enrollment anniversary date and cease to provide the Plans at any time. Credits or refunds will not be issued for services not needed or received within the 12-month enrollment period. Credit will not be issued for vaccines not recommended or administered. This offer is not valid with any other coupons or discounts. Services within the Plan can only be used at Family Pet Practice or Wixom Family Pet Practice and cannot be split between those facilities. The Plans are not transferable and apply only to the Patient identified at the time of enrollment. If no contact after 90 days of declined payments, accounts will be forwarded to collections agency.

By signing below, I agree to pay 12 consecutive monthly payments of \$ _____

Subscriber Full Name _____ Patient Name _____

Phone _____ E-Mail Required _____

Subscriber Signature X _____ Date _____

Team Use Only: Last 4 digits of Credit Card _____ Exp Date: _____/_____/_____ Team Initials: _____