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Acct. # \_\_\_\_\_ initials \_\_\_\_\_

P.E.T.S. Clinic- Iowa Park Vaccination Clinic

Date: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

By signing below, I hereby agree that the circled procedures have been approved by me. To my knowledge my cat/dog is healthy and has not bitten anyone in the past ten days. I agree to hold harmless and release from liability P.E.T.S. Clinic from any illness or fatality that results from my pet receiving the following treatment.

Owner Signature \_\_\_\_\_

Pet's name: \_\_\_\_\_ Species: CAT/ DOG Breed: \_\_\_\_\_

Color: \_\_\_\_\_ Age: \_\_\_\_\_ m/y Sex: Male /Female Spayed/Neutered: Yes/No

------(For P.E.T.S. use only)-----

Weight: \_\_\_\_\_ Rabies #: \_\_\_\_\_ City tag #: \_\_\_\_\_

**DOGS**

- Rabies \$15
- DAV2PPv \$15
- DAV2PPv + L4 (3 months & older) \$15
- Bordetella \$10
- Rattlesnake \$15
- Heartworm Test \$25 **\$12.50 or Free** NEG POS  
*(Free heartworm test w/ purchase of 1 year of prevention!!)*
- Heartworm Prevention \$ \_\_\_\_\_  
**Triheart 6 month supply = \$25, \$30, \$35**
- Microchip \$15
- Nexgard Flea&Tick Pill for Dogs (Monthly) \$25
- Nexgard Plus (**Flea/Tick/Heartworm**) \$35/pill
- Bravecto Flea&Tick pill for Dogs (Tri-monthly) \$55
- PPM \$4/pill

**CATS**

- Rabies \$15
- FVRC P \$15
- FeLV \$10
- FeLV/FIV Test \$25 NEG POS
- Senergy Flea Topical for Cats \$15
- Bravecto Flea/Tick for Cats (Tri-Monthly) \$45
- Nexgard Combo Flea/Tick \$25
- Feline Drontal \$6/pill
- Nail Trim \$0

Total Money Owed: \$ \_\_\_\_\_

Cash                      Credit                      Charge

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(For P.E.T.S. use only)

Initial of vaccine administrator: \_\_\_\_\_ Time: \_\_\_\_\_ Temp: \_\_\_\_\_

<b>Other Information:</b> _____ _____ _____
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