Financial Policy

Thank you for choosing <site-name>. Our primary mission is to deliver the best and most comprehensive veterinary care available for your pet. 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.

Payment Options:

You can choose from:

- Cash, Visa®, MasterCard®, American Express®, Discover Card®
- Convenient Monthly Payment Plans¹ from CareCredit[®]
 - o Allow you to begin treatment today and pay over time
 - Can be used repeatedly for your entire family without having to reapply¹
- -Scratch Pay
- -VetBilling

For some treatments or hospitalized care, a deposit may be required. Healthcare plans requiring comprehensive care of \$300.00 or more, will require a 50% to 100% deposit to begin your pet's treatment.

Additional Policy Information:

For clients with pet insurance, we are happy to provide you with the necessary documentation to submit a claim to your insurance carrier. Payment is due at the time services are rendered. Payment in full is required prior to discharge and service or collection fees will be applied if balance is not paid in full.

Please note: Current vaccinations by a licensed veterinarian are required for the admission of your pet to our hospital. Owner administered vaccinations are not acceptable. This includes admission for elective surgery, boarding, grooming and well animal care. Proof of vaccinations is required prior to admission and is the responsibility of the client.

I agree to allow the doctors and staff of Desoto County Animal Clinic to treat my pet and I accept responsibility for all accumulated fees associated with the care that my pet(s) receive. I understand that I am responsible for payment in full prior to discharge according to Desoto County Animal Clinic policy and will be held responsible for service or collection fees if balance is not paid in full.

Your signature below indicates that you have read and accepted Desoto County Animal Clinic's Policy Statement and that you agree to all policies on that statement. If your pet has any parasites, internal or external, while in our care, your pet will be treated for said parasites at a charge to you.

If you have any questions, please do not hesitate to ask. We are here to provide the best veterinary care available for your pet.	
By signing below, you agree to the foregoing terms of payment:	
Client/Owner Signature	Date

Client/Owner Name (Please Print)