



Mount Vernon Animal Hospital  
316 Vernedale Dr.  
Mount Vernon, Ohio 43050  
740-397-6958

**Welcome Farm Animal**  
Appointment Request/ Client Service Agreement

Name: \_\_\_\_\_ Farm Name: \_\_\_\_\_  
DOB: \_\_\_\_\_  
Spouse: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_ @ \_\_\_\_\_ Farm Premise ID# \_\_\_\_\_

Type of Species \_\_\_\_\_  
Herd Size: \_\_\_\_\_ ID/Number: \_\_\_\_\_  
Breed: \_\_\_\_\_  
Production Class: \_\_\_\_\_ Animal Location same as above: Y/N :if  
no \_\_\_\_\_  
Reason/Goal for Appt/herd check: \_\_\_\_\_

**Billing Information:**

Name of Credit Card Holder as listed on Card: \_\_\_\_\_  
Check one: \_\_\_ Visa \_\_\_ MC \_\_\_ AmEx \_\_\_ Discover \_\_\_ CareCredit \_\_\_  
Credit Card Number: \_\_\_\_\_ Security Code: \_\_\_\_\_  
Exp Date: \_\_\_\_\_  
Credit Card Billing Address (if different from above)  
\_\_\_\_\_

**Signature giving authorization to charge card once exam is complete:**  
\_\_\_\_\_ Date: \_\_\_\_\_

**Authorization and Payment**

I hereby authorize the veterinarian to examine, prescribe for, or treat the above described animal. I assume responsibility for all charges incurred in the care of this/these animals. ALL PROFESSIONAL FEES ARE DUE AT THE TIME THAT SERVICES ARE RENDERED. We will gladly prepare a written estimate if you desire. (Please ask our Dr. or Staff) I also understand that these charges will need to be paid in full at the time services. In case of extensive medical or surgical procedures where full payment may be difficult at discharge, our office accepts Visa, Mastercard, American Express, and Care Credit. There will be a service charge for any check returned unpaid. Also any unpaid balance can result in a monthly service charge.

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

Additional Animals:

Type of Species \_\_\_\_\_  
Herd Size: \_\_\_\_\_ ID/Number: \_\_\_\_\_  
Breed: \_\_\_\_\_  
Production Class: \_\_\_\_\_ Animal Location same as above: Y/N :if  
no \_\_\_\_\_  
Reason/Goal for Appt/herd check: \_\_\_\_\_

Additional Animals:

Type of Species \_\_\_\_\_  
Herd Size: \_\_\_\_\_ ID/Number: \_\_\_\_\_  
Breed: \_\_\_\_\_  
Production Class: \_\_\_\_\_ Animal Location same as above: Y/N :if  
no \_\_\_\_\_  
Reason/Goal for Appt/herd check: \_\_\_\_\_