

# POLK EQUINE

## AGREEMENT FOR VETERINARY SERVICES AND AUTHORIZATION OF PAYMENT

1. This Agreement is entered into on \_\_\_\_\_, between \_\_\_\_\_ hereinafter referred to as “Owner” and Polk Equine.
2. Owner hereby acknowledges that they have sought out Polk Equine to provide ongoing veterinary services for his/her/its animals, including but not limited to check-ups, treatment for infections, treatment for illness, surgical procedures, providing medications, and breeding services, hereinafter referred to as “services”.
3. Owner recognizes that during the course of the performance of any services by Polk Equine that unforeseen conditions may necessitate additional or different services than those initially undertaken. Owner therefore authorizes Polk Equine and its assistants or designees to perform any procedures that are in the exercise of professional judgment necessary and desirable for the care of the animal(s). The authority granted under this paragraph shall include all conditions that require treatment and are not initially known to Polk Equine.
4. Owner acknowledges that animals are inherently dangerous and that the care and handling of animals can result in serious injury, paralysis, and death. Owner further acknowledges that during the performance of the services provided by Polk Equine that Owner and his/her/its agents or designees may be responsible for the handling and control of the animals. Owner hereby states that they have insurance coverage for damages or injuries caused by his/her/its animals and that they hereby indemnify and hold harmless Polk Equine against any and all claims or causes of action relating to damages or injuries caused by Owner’s animals during or as a result of the services provided by Polk Equine.
5. Owner agrees to keep Polk Equine informed of any and all conditions of the animal(s), including but not limited to, weight loss, eating habits, fever, prior medical treatment and current or prior medical conditions which may affect any diagnosis or treatment provided by Polk Equine.
6. Owner agrees to follow through with all recuperation, therapy, or follow up care that the animal(s) may require subsequent to services being provided by Polk Equine
7. Owner acknowledges that Polk Equine has explained to Owner that there are some inherent risks associated with any veterinary service and that some of the severe risks associated with the services for the animal(s) may include death, paralysis, and infection
8. Owner acknowledges that there has been no guarantee given by anyone to Owner as to the results that may be obtained by the services provided by Polk Equine.

9. Owner agrees to pay Polk Equine all fees and expenses associated with the performance of services by Polk Equine, and also agrees to pay any additional fees or costs associated with services provided by Polk Equine that were a result of unforeseen complications or additional services.

10. Owner agrees to make payment in full for all amounts due within the terms stated on each invoice. Should Owner default in any such payments or if a check is returned for insufficient funds, Owner agrees to pay 18% interest, 30% collection fees, \$25.00 for each insufficient check returned, any bank charges that may apply, and reasonable attorney's fees and court costs incurred as a result of collection actions by Polk Equine.

11. Owner hereby \_\_\_\_\_ authorizes \_\_\_\_\_ does not authorize Polk Equine to initiate debit entries and/or correction entries as they become due to Owner's: \_\_\_ Visa \_\_\_ Master Card \_\_\_ Other \_\_\_\_\_ (select one) indicated below.

**\*\*\*please note that there will be a \$5.00 fee added to any credit card transaction\*\*\***

\_\_\_\_\_  
Legal name Date of Birth

\_\_\_\_\_  
Driver License Number Phone Number

\_\_\_\_\_  
Billing Address E-Mail Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Name on Credit Card

\_\_\_\_\_  
Card Number Expiration Date 3 digit CVV

This agreement and authorization is to remain in full force until Polk Equine has received written notification from Owner of its revocation, or until terminated by Polk Equine.

\_\_\_\_\_  
OWNER (or agent(s) authorized to act on Owner's Behalf) DATE

\_\_\_\_\_  
AGENT(S) DATE

\_\_\_\_\_  
POLK EQUINE DATE