



NORTH END
PET
HOSPITAL

3819 North 25th Street
Tacoma, Washington 98406-5317

Phone: 253-752-2265
Fax: 253-759-2487

Outdoor Kitten Health Care Plan

Congratulations on the addition of your new four-legged family member! We want to help you provide the preventive care your new kitten needs for a lifetime of happiness and love.

Three Complete Preventive Exams (8, 12, & 16 weeks)	X
Vaccinations	
Feline Distemper (8, 12, & 16 weeks)	X
Feline Leukemia (8 & 12 weeks)	X
Rabies (16 weeks)	X
Stool Specimen Examination (8 & 16 weeks)	X
Intestinal Parasite Treatment (if needed)	X
Feline Leukemia/FIV Test (8 weeks)	X
Ear Mite Treatment (if needed)	X
Microchip	X
Total Value	\$538.50
Paid in full at time of first visit – 20% savings	\$430.80
Two equal payments at the first two visit – 15% savings	\$457.74
	(two payments of \$228.87)

Terms and Conditions:

- a) Plan must be paid in full at the time of the first visit to receive the discount.
- b) This offer is not refundable nor is it transferrable to any other pet or owner. There can be no exceptions.
- c) All services must be provided within six months of the date below.
- d) Any services or products required by the pet which are not specifically included in the package will be charged at regular hospital rates.

I choose the Outdoor Kitten Health Care Plan for my kitten named _____.

I am the owner of the above named pet, am at least 18 years of age, and agree to the above terms and conditions.

Printed Name

Signature

Date