



## **Maricamp Animal Hospital & Client Relationship Agreement**

This agreement between Maricamp Animal Hospital (MAH) and our clients is to ensure that all of our patients have the opportunity to live happy, healthy and long lives. It is extremely important for our patients to maintain their annual wellness exams (every year) for adults or semi-annual exams (every 6 months) for senior patients in order to achieve the preventable measures needed for their overall well being. An annual wellness is time you get to spend with the doctor to ask any questions or address any concerns. Most importantly, the examination given by the doctor can reveal informative information about your pet's health. The doctor will listen to the heart and lungs, make sure lymph nodes are normal size, and talk to you about any lumps/bumps or developing dental disease or arthritis. The more we are able to prevent disease processes, the longer and healthier life your pet will live. It is our responsibility to make sure our patients receive the best possible medical care and we believe wellness is the key.

Below is a list of policies at Maricamp Animal Hospital (MAH):

1. I acknowledge, open and honest communication is a must to ensure the best relationship possible.
2. I acknowledge, wellness visits are important for the health and well being of my pet.
3. I understand, MAH has a reminder system in order to keep you fully informed of my pet annual or semi-annual wellness visits.
4. MAH reminder system consists of reminder cards, text, push notifications, emails and personal phone calls.
5. I understand, MAH will follow up with me on a continuous basis until a form of communication is made. Examples of need for communication could include but not limited to checking up on sick patients, updating medical records, new client follow up, wellness follow up, patient reminder follow up, approved prescription, medical recommendations.
6. I acknowledge, MAH understands that life gets in the way sometimes and it is difficult to answer your phone. However, our priority is to advocate for your pet and their health. Therefore until we reach someone and a plan is in place for the care of your pet, we will continue to try to contact you.
7. It is crucial at this point to be open and honest with MAH to ensure you are comfortable and happy with the plan that we agreed upon.
8. I acknowledge, MAH calls to follow up with our patients after their appointment to ensure the client completely understands the previous appointment, any medications prescribed and the patient is doing well and continuing to improve.
9. I acknowledge, MAH collects emails only for appointment reminders, consent forms and internal promotional items such as educational material, monthly promotions, specials and events.
10. I acknowledge, MAH will always provide the client with a written estimate for all services and this estimate must be signed at every visit. An estimate is our way of keeping the line of financial communication open.
11. Each estimate will be a tailored estimate of the best medical recommendation for your, the owner is in full control over what they accept or decline and we are always here to help educate you on the importance of each recommendation.
12. In order to help complete any medical recommendations, we will create future appointments with the owners agreement per the veterinarian's recommendations.
13. MAH has standard monthly promotions and pop up push notification and Facebook specials in order to give all clients an opportunity to financially afford any Wellness or Surgical recommendations.
14. I acknowledge, MAH will require by law a current rabies vaccine in order to be seen by our medical staff.
15. I acknowledge, MAH requires all patients boarding with us must be up to date with annual vaccines including DHLPP vaccine, Bordetella vaccine, Influenza vaccine, FVRCP vaccine, Rabies vaccine and a current Negative parasite screening test within the last 6 months. This is to ensure all boarders are protected against highly contagious diseases.

16. I acknowledge, MAH is a medical hospital that schedules appointments in advance. Walk-ins are welcome however appointments will be seen first by the veterinarian.
17. I acknowledge, MAH accepts emergency day time visits and a medical emergency will become priority for the veterinarian and staff.
18. I acknowledge, MAH has a 24 hour advance notice appointment cancellation and/or no show fee of \$15. This ensures that all of our clients and patients have the same opportunity to be seen for their medical needs. When you cancel last minute or no show to an appointment, you deprive a patient from being able to be seen by the veterinarian.
19. MAH will call and email clients 2 days in advance. And text you the day prior to your appointment. If you need to change or reschedule your appointment, please do so at this time. No fee will be charged if you reschedule the day of your appointment or cancel before the 24 hour mark. If there is a different way you want to be reminded then please let us know.
20. I acknowledge, the Florida Prescription Law requires a current wellness exam within the last year to receive any prescriptions which includes but not limiting to all heartworm and most flea medications.
21. I acknowledge, MAH has a prescription refill policy that includes medications to be filled will need a Doctors approval. If there are any questions or concerns, we will give you a call. The prescription will be ready for pickup within a 24 hour window once the prescription has been requested and we will give you a courtesy call or send a notification to our app to let you know that it is ready for pick up.
22. I acknowledge, MAH has an entire team dedicated to social media, website and promotional actions. We have the right to take a photo of your pet and use it for promotional, educational and training purposes, now and in the future, as our marketing team develops different campaigns, posts, videos, blogs, etc.
23. I release Maricamp Animal Hospital of any liability should I become bitten or injured while on the premises; including but not limited to the medical hospital and parking lot.
24. I hereby hold harmless and release and forever discharge Maricamp Animal Hospital all claims, demands, and causes of action which I, my heirs, representatives, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.
25. I understand, it is the owner's responsibility to explain to MAH if you want to change the way you participate in our reminder system or follow up calls. If at any point, the owner declines contact from MAH then it is the owner's' responsibility to keep up with their pets' wellness plan and medical needs. MAH would then only call one time every 6 months just to touch base with you and check in to see how the pet is doing and see if you have any questions or concerns.
26. Open and Honest Communication with Education and Mutual Agreements between MAH and our Clients is the Key to Happy and Healthy pets in Marion County!

We believe that all pets deserve the right to treated like a family member  
 ☺ Gentle and Compassionate Care to ensure a Happy and Healthy pet ☺

My questions regarding this authorization have been answered and completing this form of my own free volition. The terms of this authorization shall commence on the date hereof and be without limitation. I warrant and represent that I am over the age of 18 years old. I have read the above conditions and policies and I am willing to engage in a relationship with Maricamp Animal Hospital. We look forward to you becoming part of our MAH family and we are blessed you have allowed us to help your four legged family members be around as long as possible!

**Please sign and date below:**

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

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

Printed Name: \_\_\_\_\_