KLAICH ANIMAL HOSPITAL

New Client Form

Welcome to Klaich Animal Hospital. We would like to thank you for giving us the opportunity to care for your pet(s). Our friendly and knowledgeable staff look forward to providing the most compassionate and comprehensive care to you and your animal. To ensure the best care possible, please take the time to fill out our client information sheet and read our hospital policies.

Owner Information

Owner Name: _____SSN or Last 4 Digits:_____

Spouse Name:_____ SSN or Last 4 Digits:_____

Address:_____City:_____Zip:_____

Primary Phone Number:_____ ☐ Home ☐ Cell

Secondary Number: _____ ☐ Home ☐ Cell

E-mail Address: _____

How did you hear about us? _____

Hospital Policies:

Payment is always due at the time of service. Please discuss any financial concerns with a client service representative prior to exam or treatment. We accept cash, checks (there will be a $30 fee for any returned checks), Visa, Discover, American Express or Mastercard. We also offer Cherry and Carecredit upon approval. Please feel free to ask our staff about Carecredit or Cherry. **_____Initial**

During the hours not specified as "business hours" there are times when hospitalized pets will be unattended. Those cases that are in need of constant, critical care and/or monitoring are advised to transfer to a facility that is able to care for those needs. It is up to the owner's discretion how he/she chooses to comply with the recommendations of our veterinarian caring for their pet's best interest. **_____Initial**

We understand that there may be times when you must miss an appointment due to emergencies or obligations from work or family. However, when you do not call to cancel an appointment, you may be preventing another patient from getting much-needed treatment. Same day cancellations will result in an **$85 cancellation fee** that will be applied to your account. You may review our full cancellation policy on our website under 'Hospital Policies'. **_____Initial**

Our urgent care exam fee is $120. There is no separate exam or walk-in fee associated with the urgent care visit, however we do require a $150 deposit for new clients. The urgent care examination fee also does not include diagnostics, treatment, or prescribed medication. Urgent care service will be provided on a first-come, first-served basis between appointments. Our technical staff will offer triage assessments on our more critical or emergent cases to determine how quickly the patient needs to be seen by our veterinary team.. All emergency cases will take priority over urgent care exams and appointments. Please be aware that on certain days the demand for urgent care exams is high and we may need to stop seeing urgent care exams before our posted time. **_____Initial**

I confirm that the above information is correct and that I am the owner or authorized agent of the patient(s) that will be treated.

Signature:_____Date:_____

Financial Contract/Agreement

1. I understand that if I do not pay my account with Klaich Animal Hospital in full, my account may be assigned to a collection agency for collection. _X_____

2. I understand that if my account is assigned to a collection agency, the collection agency will charge a commission or fee of up to 50% of the amount I owe to Klaich Animal Hospital. I agree that if my account is assigned to a collection agency, that Klaich Animal Hospital may add the amount of the collection agency's commission or fee to the amount that I owe, and I agree to pay that additional amount. _X_____

3. I understand that the addition of a collection agency's fee or commission to my unpaid balance may well result in my owing a sum substantially greater than the amount owed under my rental agreement. I understand, for example, that if the unpaid balance that I owe to Klaich Animal Hospital is $1000, that up to 50% may add up to $500 to my account, and I agree to pay the sum of $1500 in such an event. _X_____

4. I understand and agree that in the event legal action is commenced to enforce my obligations hereunder, that I will pay court costs and reasonable attorney's fees. _X_____

_____ _____

Signature Date

Klaich Animal Hospital Bullying Policy & Agreement

At Klaich Animal Hospital, we understand that emotions can run high, especially when it comes to the care of beloved pets. However, we are committed to maintaining a safe, respectful, and professional environment for our staff, clients, and patients. **Bullying, harassment, or aggressive behavior toward our team members will not be tolerated.**

Definition of Bullying

Bullying includes, but is not limited to:

- Verbal abuse, yelling, or hostile language
- Threats, intimidation, or personal attacks
- Repeated belittling, criticism, or humiliation
- Cyberbullying, including inappropriate emails, social media posts, or online harassment
- Any behavior that creates a toxic or unsafe work environment

Policy Agreement

By signing this document, I acknowledge and agree that:

1. **I will treat Klaich Animal Hospital staff with respect** at all times.
2. **I understand that if I engage in bullying behavior,** I may receive a verbal or written warning.
3. **Severe or repeated violations of this policy may result in dismissal** from Klaich Animal Hospital's services.
4. **Threats or acts of violence will be reported to law enforcement.**
5. **Concerns regarding my pet's care should be addressed professionally and respectfully.**
6. **Klaich Animal Hospital reserves the right to terminate services to any client at any time, for any reason.**

Failure to adhere to this policy may result in refusal of service for my pet(s) at Klaich Animal Hospital.

Acknowledgment & SignatureI have read and understand Klaich Animal Hospital's Bullying Policy. I agree to abide by this policy and treat staff with kindness and professionalism.

Client Name (Printed): _____

Client Signature: _____

Date: _____

Pet's Name(s): _____