

Low Cost Vaccine Clinic Client Form

Name (First & Last): _____ Spouse Name: _____

Address: _____ City & Zip: _____

Email Address: _____

Cell Phone: _____

Pet's Name #1: _____ Dog or Cat _____

Male or Female: _____ Age: _____ Spayed or Neutered: _____

Breed: _____ Color: _____

Which Vaccines would you like:

Rabies (dog/cat) \$10 _____ **DHPP** (dog) \$15 _____ **Lepto** (dog) \$15 _____

Bordetella (dog) \$15 _____ **Flu** (dog) \$30 _____ **Lymes** (dog) \$30 _____

Rattlesnake (dog) \$30 _____ **FVRCP** (cat) \$15 _____ **Leukemia** (cat) \$20 _____

Pet's Name #2: _____ Dog or Cat _____

Male or Female: _____ Age: _____ Spayed or Neutered: _____

Breed: _____ Color: _____

Which Vaccines would you like:

Rabies (dog/cat) \$10 _____ **DHPP** (dog) \$15 _____ **Lepto** (dog) \$15 _____

Bordetella (dog) \$15 _____ **Flu** (dog) \$30 _____ **Lymes** (dog) \$30 _____

Rattlesnake (dog) \$30 _____ **FVRCP** (cat) \$15 _____ **Leukemia** (cat) \$20 _____

*Do you want heartworm or flea/tick preventative (not discounted)? _____

**Do you want a pyrantel (strongid) dewormer for \$5? _____

Total Price = \$ _____

Cash _____ Visa _____ Mastercard _____ Discover _____ Amex _____ CareCredit _____

Checks are not accepted for the Vaccine Clinic