



# CEDAR VETERINARY GROUP

## LIFETIME CARE CLUB APPLICATION FORM



Please complete this form accurately and in full, using **BLOCK CAPITALS**.

### Your Details

(These details should match those we have for you on our system)

Title:	<input type="text"/>	First name:	<input type="text"/>
Surname:	<input type="text"/>		
Address:	<input type="text"/>		
	<input type="text"/>	Postcode:	<input type="text"/>
1st Tel:	<input type="text"/>	2nd Tel:	<input type="text"/>
Email:	<input type="text"/>		

### Details of Your Pet/s

Name:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Species: <small>(delete as appropriate)</small>	Dog/Cat/Rabbit/Horse	Dog/Cat/Rabbit/Horse	Dog/Cat/Rabbit/Horse
Breed:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender: <small>(delete as appropriate)</small>	Male/Female	Male/Female	Male/Female
Adult Weight: <small>(expected if puppy)</small>	kg	kg	kg
Plan Type: <small>(delete as appropriate)</small>	Dog Tablet / Dog Spot-on Cat Program / Cat Spot-on Rabbit / Horse	Dog Tablet / Dog Spot-on Cat Program / Cat Spot-on Rabbit / Horse	Dog Tablet / Dog Spot-on Cat Program / Cat Spot-on Rabbit / Horse
Monthly Price*:	£	£	£
Start Date:	05 /	05 /	05 /

#### I declare that:

The information I have given on this form is true and complete. I understand that if I have not given all the information that I know or can reasonably get that is relevant to this application, the contract will not be legally valid. I am 18 years old or over.

This contract is for a minimum of 12 months from the signed date on the contract. If you decide to cancel within the 12 month period, you may be recharged for any products/services which have not been covered by the monthly payments. If your pet's weight changes from that specified then further charges may be incurred. This Pet Healthcare Plan is not transferable. There may be an annual price increase at the discretion of the practice; we will write to you in advance of this. Certain products, if requested specifically, may attract a surcharge. All products included in the annual subscription ie. vaccinations, flea and worming treatments must be taken within the annual payment period. Products cannot be carried forward to the next annual year. Payments will be taken by separate monthly Direct Debits. We will terminate the plan if we are unable to collect two consecutive payments by direct debit. Following a default payment, we will make attempts to collect funds due. If these attempts are unsuccessful, the plan will be cancelled.

I have read and agree to the Terms and Conditions of the Pet Healthcare Plan

Signature of payer:	<input type="text"/>	Date:	<input type="text"/>
Practice signature:	<input type="text"/>	Date:	<input type="text"/>

# Instructions to your Bank or Building Society to pay by Direct Debit

Name and full postall address of your Bank or Building Society

To: The Manager
Bank/Building Society
Address
Postcode



Please pay Cedar Veterinary Group Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Cedar Veterinary Group and, if so, details will be passed electronically to my bank or building society.

Name(s) of Account Holder(s)

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Account Number

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Sort Code

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Reference

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Service User's Number

162823
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Signature(s)

Date

Cedar Veterinary Practice Limited, Clifton Veterinary Surgery, Anstey Lane, Alton, Hants GU34 2RH (T/A Cedar Veterinary Group)

## The Direct Debit Guarantee



Banks and building societies may not accept Direct Debit Instructions for some types of account. This Guarantee should be detached and retained by the payer.

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Cedar Veterinary Group will notify you eight working days in advance of your account being debited or as otherwise agreed. If you request Cedar Veterinary Group to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Cedar Veterinary Group or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society. If you receive a refund you are not entitled to, you must pay it back when Cedar Veterinary Group asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.