

Financial Policy

River City Veterinary Hospital **requires payment in full at the end of your pet's visit or at the time of discharge.** To make this as easy as possible for you, we offer several payment options.

Payment Methods

- Cash
- Visa, MasterCard, and Discover
- CareCredit® Offers Convenient Monthly Payment Plans (subject to credit approval)
 - 6 months no interest
 - Allow you to begin treatment today and pay over time
 - Can be used repeatedly without having to reapply
- ScratchPay (www.scratchpay.com) – one time loan for veterinary services. Convenient payment plan options and high approval ratings.
- **Unfortunately, we do not accept checks.**

Return Policy:

Prescription medications are non-returnable, and their sales are final. Prescription diets have a palatability guarantee and can be returned within 30 days of purchasing. Any non-prescription items that are returned will be credited to the client's account if returned within 30 days of purchasing.

Estimates:

We are happy to provide estimates for all services. It is the client's responsibility to request an estimate prior to services rendered.

Billing:

We charge 12% interest on all outstanding account balances older than 30 days. If you have an account 90 days past due, River City Veterinary Hospital may relinquish your overdue balance to a collection agency. You will be responsible for all interest, service charges and collection fees.

Deposits:

For treatment plans or hospitalized care with an estimated cost of \$500 or more, we may require a 50% or more deposit to begin your pet's treatment.

Insurance:

For clients with pet insurance, we are happy to provide you with the necessary documentation to submit a claim to your insurance carrier. You may also keep a signed copy of your insurance claim form on file with us to be submitted at the end of your appointment.

I understand that I am financially responsible for the care/treatment that I request for any patient now or in the future. By signing below I am acknowledging and agreeing to the above terms of payment:

Owner Signature _____ Date _____

Owner Printed Name _____