

468 Shannon Rd W Suite 6-B
Sulphur Springs, TX 75482
903-439-2953

ANIMAL PROTECTION LEAGUE
www.aplspayneuter.org
(Mobile Unit - 903-440-4911)

1308 Pine Tree Rd
Longview, TX 75604
903-753-PETS (7387)

PLEASE PRINT CLEARLY

How did you hear about us (circle one)? Repeat Client Friend Radio Flyer Newspaper Other _____

Owner's Name: _____ E-Mail Address: _____


Owner Phone: _____ EMERG#: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

PET NAME	DOG /CAT	BREED	COLOR	M/F	AGE	WAS PET A STRAY?

If you have concerns about your pet's health or ability to survive surgery, we suggest you take your pet to your local, full service veterinarian for blood work and a health evaluation

** All dogs will wear an e-collar for at least 14 days. Animal Protection League will not be liable for incision repair/antibiotics due to lick damage. The e-collar will help prevent lick damage, but is not a guarantee.

 The APL wants to share your furry friends with our friends online via Facebook. If time permits and we snap a photo of your pet, please initial here if you give us permission to share those photos online: _____

APL offers additional post op pain medication (3 day supply / \$15). Initial if you would like to take this home today _____

DOGS - Is your dog on heartworm prevention? YES NO If YES, what kind? _____

CATS - If the tech finds tapeworms (\$10) and/or earmites (\$5), do you want your pet treated? YES NO

DOG VACCINATIONS

Rabies - \$12.00
Distemper/Parvo - \$18.00
Bordetella - \$18.00
Package (all 3) - \$35.00
Lepto \$15
Deluxe Package (all 4) - \$45

Interceptor Plus: Single ds 6 pk
2-8 pounds \$11 \$45
8-25 pounds \$11 \$45
25-50 pounds \$12 \$55
50-100 pounds \$14 \$65

ADDITIONAL FOR DOGS

Basic Wormer - \$5.00
Drontal Wormer - \$10-25/pill
Heartworm Test - \$20.00
Nail Trim - \$5.00

ADDITIONAL FOR BOTH

Microchip - \$30.00*
*Includes lifetime registration fee

CAT VACCINATIONS

Rabies - \$12.00
Feline Distemper - \$18.00
Feline Leukemia - \$20.00
Package (all 3) - \$35.00

ADDITIONAL FOR CATS

Basic Wormer - \$5.00
Profender Dewormer - \$20
FIV / Leukemia Test - \$35.00
Nail Trim - \$5.00
Earmite Treatment - \$5.00

HEARTWORM & FLEA PREV.

Simparica Trio: Single dose 6 pk
2.8-5.5 lbs \$30 \$145
5.6-11.0 lbs \$31 \$148
11.1-22.0 lbs \$32 \$152
22.1-44.0 lbs \$33 \$158
44.1-88.0 lbs \$34 \$162
88.1-132 lbs \$35 \$165

FLEA PREVENTION - CATS

Revolution: Bravecto(3mo)
1 dose \$30 1 dose \$58
6 pack \$150

FLEA/TICK PREVENT-DOGS

NEXGARD BRAVECTO

1 MONTH		3 MONTH	
4.4-9.9 lbs	\$24 pill	4.4-9.9 lbs	\$61
10-24 lbs	\$25 pill	10-22 lbs	\$62
24-60 lbs	\$29 pill	22-44 lbs	\$63
60-129 lbs	\$30 pill	44-88 lbs	\$64
*		88-123 lbs	\$65

HEARTWORM PREVENTION

Triheart:	Single dose	6 pk
1-25 lbs	\$8	\$35
26-50 lbs	\$9	\$40
Over 50 lbs	\$10	\$50

Animal Protection League

PET OWNER: COMPLETE ALL INFORMATION IN **BOLD** LETTERS.
YOUR PET **CANNOT** BE SEEN UNTIL THIS FORM IS COMPLETED.

If you have concerns about your pet's health, we suggest you take your pet to your local, private practice veterinarian for blood work and a health evaluation

Date: _____

Circle one: Dog Cat

Owner Name: _____

Sex: Female Male

Pet Name: _____

Age: _____

Reason for visit today: _____

Has this pet shown any signs of illness in the past 2 weeks? Yes No

Does this pet have any chronic illness or is this pet currently being treated for any conditions? Yes No

If yes, please list: _____

Is this pet coughing, sneezing, lethargic, or having diarrhea? Yes No

Has this pet had any significant weight gain or weight loss? Yes No

Has this pet **EVER** had a seizure? Yes No Has this pet **EVER** had a reaction to vaccines? Yes No

Could this pet be pregnant? Yes No Is this pet currently nursing puppies/kittens? Yes No

Is pet on flea prevention? Yes No Is pet currently on Heartworm prevention? Yes No

Any other information regarding your pet that we should know about? _____

For veterinarian use only:

Weight _____ Temp _____

Patient appears healthy for surgery Yes No

Dr's Notes:

Your pet is visiting us today! Checkout time is at **3PM** and staff will be leaving at 3:30PM. **Late fees start at 3:15PM at \$20 per pet and accumulate every 15 minutes.** If you have not picked your pet up by the time the staff leaves location, your pet will be going home with a staff member to care for your pet overnight as APL does not offer boarding services per City of Longview ordinance. If you did not pick up your pet, you will be responsible for making arrangements to do so the following day at the Longview office at 1308 Pine Tree Rd. **An overnight boarding fee of \$50 per pet will be added each night a staff member has to care for your pet/s overnight.** If arrangements are not made, APL will be forced to send a certified letter regarding animal abandonment, charges will be filed, and APL will be forced to surrender your pet to the local animal shelter.

By signing this, I confirm I am fully aware of the checkout time regarding my pet, the consequences regarding not picking my pet up on time, and that I am solely responsible for any fees regarding services rendered as well as late/boarding fees. If my pet is abandoned and as a result, surrendered, I am still financially responsible for fees accrued.

Signature: _____

Date: _____



ANIMAL PROTECTION LEAGUE

Client Consent to Services

Lifestyle Questionnaire – I acknowledge that I have reviewed/completed the lifestyle questionnaire for my pet, I am at least 18 years of age, and I am responsible for the services selected/not selected for my pet.

Vaccination Information – I understand that vaccinations and parasiticides will substantially reduce, but may not completely eliminate, my pet’s chances of contracting or controlling the illnesses or parasites we are trying to prevent.

Side Effects – I understand that there is a possibility that my pet may develop side effects after receiving vaccinations and/or administration of parasiticides and that these side effects are usually minor and resolve without need for additional veterinary care. Common side effects may include – lethargy/depression/drowsiness, decreased appetite, limping/soreness over vaccination site, antisocial behavior, small swelling at/over vaccination site.

NORMAL SIDE EFFECTS FROM VACCINES	ALLERGIC REACTIONS FROM VACCINES – ER VISIT NEEDED
FEVER	EXCESSIVE VOMITING (REPEATEDLY/DOES NOT STOP)
LETHARGY	EXCESSIVE DIARRHEA (REPEATEDLY/DOES NOT STOP)
LOCALIZED SWELLING OF INJECTION SITE	EXTREMELY PALE OR WHITE GUMS
LOCALIZED TENDERNESS OF INJECTION SITE	COLLAPSE OR INABILITY TO GET UP
SHORT TERM DROOLING AFTER ORAL MEDS	FACIAL SWELLING -- THICK LIPS (JOWLS)/PUFFY EYES
LACK OF APPETITE (SHOULD NOT EXCEED 24HRS)	HIVES (USUALLY PAIRED WITH ANOTHER REACTION)

If you are concerned by any behavior or symptom your pet exhibits after the administration of a vaccination or parasiticides, contact us at (903) 753-7387. **If symptoms persist for over 48 hours, please contact your regular/private practice veterinarian.** It is recommended that I report any suspicious symptoms/reactions so they can be properly recorded and monitored. I understand that should my pet develop any severe reaction or symptom that is concerning to me emergency veterinary care may be necessary and it is my financial responsibility to seek care at the nearest veterinary facility.

Heartworm Testing and Prevention – Your pets heartworm test result is valid for 60 days. Prevention must be started/continued within that time. Annual testing is required to be able to purchase prevention here at Animal Protection League and to ensure the prevention is serving its purpose. I understand that I can purchase prevention here at Animal Protection League or at my regular/private practice veterinarian of choice. I agree that I will not give heartworm prevention without a negative result, and understand that prevention will not be prescribed should my pet test positive today. Animal Protection League does not work with any third-party online pharmacies or provide written prescriptions, if I request prevention via online pharmacy, I understand it will be denied. Animal Protection League will provide record of test result should I want to get prevention at my regular/private practice veterinarian.

To the best of my knowledge, I confirm that my pet has no sign of disease unless disclosed in the lifestyle questionnaire, is not allergic to vaccinations/parasiticides, and is not pregnant. I have read and understand all of the provisions as well as the possible reactions and I have had the chance to ask any and all questions I have regarding the risks associated with services today that were recommended for my pet based on a discussion of my pets’ lifestyle and risk. I agree to accept all risks of vaccinations/parasiticides and accept legal and financial responsibility for all charges incurred as a result of such risks. I further acknowledge that Animal Protection League or any of their veterinarians, director, staff, or any other individuals or entities associated therewith, will not bear any legal or financial responsibility for such risks and will not bear any legal or financial responsibility for any charges or losses incurred by me. By signing below, I hereby consent to proceed with the recommended vaccinations, tests, and antiparasitic for my pet/s.

Signature: _____

Date: _____