



Client Information

Full Name: Date of Birth:
Address:
City: State: Zip:
Phone: Email:
Animal(s) Name(s):
Facility Address:
City: State: Zip:

Plan options

6 Months x \$125 8 Months x 93.75 10 Months x 75.00 12 Months x 62.50
Number of Animals: Total Due: \$ Monthly Payment: \$

How would you like to be reminded?

Phone Call Text Email Mailed Invoice

Payment Preference

Cash Check Venmo PayPal (incurs a 3.5% processing fee)

Select the day you would like to pay by each month:

Terms of Agreement

I, _____ (the debtor) understand that \$ _____ is the total amount owed and agree to make monthly payments of \$ _____ due on the _____ of each month until the total amount owed is paid to Amanda Bowers of Hands 4 Hooves, LLC (the creditor).

I, the debtor, understand that failure to make the above payment each month to the creditor will result in legal charges and that I am responsible for all legal fees in addition to the remaining balance owed to the creditor.

I, the debtor, understand that in the event that the animal receiving the sessions passes away, is injured or sold, that I am only expected to pay for the sessions that were given.

I, the debtor, understand that there are no refunds for sessions that have been completed. In the event that the debtor has made payment, but the animal was not able to have sessions due to sale or death, the creditor will refund the amount that was "overpaid".

I, the debtor, understand that there is no penalty for paying off the remaining balance prior to the final payment due date.

I, the debtor, understand that should I choose to make payments electronically, that there is a 3.5% processing fee that will be incurred at the time of payment.

I, the debtor, understand that the first payment of \$ _____ & evaluation fee (if applicable) of \$25.00 are due at the first session. Travel fee of \$ _____ is due at the time of each service.

Client Signature:

Date: