



# INTERMOUNTAIN PET HOSPITAL

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## FINANCIAL POLICY AND MEDIA RELEASE

*Thank you for choosing Intermountain Pet Hospital for your pet care needs. We are dedicated to providing the highest quality care to all of our patients.*

*In order to provide you services with the highest level of quality, we cannot extent credit out of our office. Please understand that payment in full is due at the time of service. We may require a deposit for major procedures. There will be a 1.5% or a minimum \$3.00 monthly charge to any unpaid balance. To help you obtain your financial responsibility the following payment options are accepted.*

### PAYMENT OPTIONS

- *Cash/Check: We accept payment by cash or check at the time of service.*
- *Bank Credit/Debit Card: We accept payment by MasterCard, Visa, Discover and American Express.*
- *In an effort to offer our client more personalized financial arrangements, we are pleased to offer Care Credit. If you wish to take advantage of this payment plan, please ask one of our staff members for an application.*

### SOCIAL MEDIA RELEASE

I grant **Meridian Veterinary/Intermountain Pet Hospital & Lodge**, permission to copyright, use, reuse, publish, and re-publish information about me and my pet and photographs of me and my pet in which I may be included, in whole or in part.

I waive the right to inspect or approve the finished product or products and other matter that may be used in connection there with or the use to which it may be applied.

I understand that the photos will be used for educational and other purposes and I release, discharge, and agree to save harmless **Meridian Veterinary/Intermountain Pet Hospital & Lodge** and all persons acting under its permission or authority from liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur in the taking of said pictures or using the information in any subsequent processing thereof, as well as any publications thereof.

I warrant that I am of full age and have the right to contract my own name. I have read the above release prior to its execution, and I understand the content thereof. This release shall be binding upon me and my heirs, legal representatives, and assigns.

**I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE FINANCIAL POLICY AND SOCIAL MEDIA RELEASE POLICY.**

**Responsible Party**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date