



## About You

Please fill in as fully as possible using BLOCK CAPITALS

Title: Mr Mrs Ms Miss Other \_\_\_\_\_ First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Primary Tel: \_\_\_\_\_ Secondary Tel: \_\_\_\_\_

Email Address: \_\_\_\_\_

## About Your pets

Pet 1

Pet 2

Pet 3

	Pet 1	Pet 2	Pet 3
Name			
Date of birth			
Species	Cat /Dog	Cat /Dog	Cat /Dog
Breed			
Gender	F/M	F/M	F/M
Weight (kg)			
Plan			
Monthly Price			

DATA PROTECTION

Total

To setup and administer your pets health plan we will hold and use the information supplied by you. By signing this form you confirm that you consent to such use of this personal data. We may disclose information about you when there is a legal requirement for us to do so and to people who provide a service to us on the understanding that they will keep the information confidential and in accordance with the Data Protection Act 1998.

Market Hall Vets may contact you with details of its other products and services , we may contact you by post, telephone, or electronically if appropriate. If you do not wish us to do this please tick the box.

## Amount you are paying

I agree that the following monthly payments as detailed below can be collected from my bank account.

Monthly Payment of £

The collection date will be the 17th of the month or where not possible it will be the next working day.

## Declaration &amp; signature

I declare that the information I have given in this application is true and complete. I accept the attached terms and conditions issued by Market Hall Veterinary Group for the provision of the agreed routine pet health plan. I am 18 years old or over.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## Instruction to you Bank or Building Society to pay Direct Debit



Originator's Identification Number

2 4 7 0 6 3

Market Hall Veterinary Group, Old Market Surgery,  
St Clears, Carmarthen. SA33 4DY.



1. Name and full postal address of you Bank or Building Society Branch.

To: The Manager
Bank or Building Society
Address
Postcode

Banks and Building Societies may not accept Direct Debit Instructions from some type of accounts.

2. Name(s) of account holder(s)

3. Bank Sort Code

4. Bank or Building Society Account number

5. Market Hall Vets reference (office use only)

6. Instruction to you Bank or Building Society

Please pay Market Hall Veterinary Group Direct Debits from the account detailed on this instruction subject to safeguards assured by the Direct Debit Guarantee. I understand that the instruction may remain with Market Hall Veterinary Group and if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date

## Terms & Conditions

### These terms and conditions should be read in conjunction with your Pet Health Plan leaflet

Your Payment Plan is administered by Market Hall Veterinary Group, Old Market Surgery, St Clears, Carmarthen. SA33 4DY.

1. The cost, content and delivery of the goods and services paid for by this Plan is agreed between you and Market Hall Veterinary Group. Where you choose for your pet to have routine care or treatment provided by a practitioner independently of our practice, your pet will not be covered by your Pet Health Plan
2. Your plan only remains in force if you pay your monthly instalments, without default.
3. This is a preventative health plan and as such **does not constitute any form of insurance.**
4. The Pet Health Plan only applies to the named pet(s) on the registration form over leaflet and is not transferable between pets.
5. The scheme is payable by direct debit instalments at the prices noted in the registration form. Payments will be managed by Market Hall Veterinary Group. You will be required to complete and sign the form over leaflet, including the Direct Debit mandate form. Once we have received your first payment, howsoever paid, your Pet Health Plan will be activated and the contract between you and us will be formed. All subsequent payments will be collected by direct debit. The direct debits will be collected on the 17th of the month, or where this is not possible, the next working day.
6. We may terminate this contract if you fail to make payments due under it (in accordance with clause 5) or if, in our reasonable opinion, you (and/or any person who brings the pet to us in relation to the services) are aggressive and /or abusive to any of our staff.
7. This contract is for a minimum term of 12 months from the date beside your signature in the declaration box on the application form (the anniversary date) and, unless you give written notice to terminate it shall continue for successive 12 month periods.
8. You must be over 18 years of age.
9. If Market Hall Veterinary Group is unable, because of a default by you, to collect a payment we will inform you accordingly and will attempt to collect two payments the following month. If you default on two successive payments, Market Hall Veterinary Group will inform you your plan has been subsequently cancelled.
10. The cost of sedation is not covered on the plan for any procedure other than surgical and dental procedures.
11. Urine tests do not cover the costs, where required, of cystocentesis or catheterization.

12. Health care plan discounts can not be used in conjunction with seasonal discount promotions. Where the item is an additional discounted item on the Pet Health Plan, the client will be entitled to the larger of the discounts available.

13. Pet Health Plan clients can take advantage of the loyalty scheme offered by Virbac on their food (whilst it is available).

14. The plan is not transferable.

15. Price plans will be normally be reviewed on a yearly basis, where alterations in pricing occur you will be informed in writing (correspondence sent to your last known address by ordinary post will be treated as adequate notice) 1 month before the change.

16. Your pets monthly fee will also change as different weight thresholds are reached. Where alterations in pricing occur you will be informed in writing (correspondence sent to your last known address by ordinary post will be treated as adequate notice) 1 month before the change.

17. Where you are given notice of an increase in your monthly fees, your direct debit will be altered at the end of the notice period, unless in the mean time you end the contract.

### Cancellation

If you cancel at any time other than on the anniversary date (see clause 7) you will be required to pay us the outstanding amount for the treatment received at the full list price or if payment is monthly the direct debit fee pro rata until the anniversary date, whichever is lower. You must give at least one month's advance notice of your wish to terminate your Pet Health Plan. We will advise you of your last direct debit payment. If a payment is cancelled the client is liable for the full cost of treatment less what they have paid. No refunds of fees will be allowed except in the case of administrative error or death of the pet or client.

### Complaints Procedure

Should you have any cause for complaint with regards to the administration of your direct debit, you should in the first instance contact:-

Sarah Worthington (credit controller)

Market Hall Veterinary Group

Old Market Surgery,

St Clears,

Carmarthen,

SA33 4DY.

Tel: 01994 230451

Email: accountmhvg@btconnect.com

**I have read and agree to the terms and conditions**

Signature \_\_\_\_\_

Date \_\_\_\_\_

### The Direct Debit Guarantee

This Guarantee is offered by the bank 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 Market Hall Veterinary Group will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Market Hall Veterinary Group to collect a payment, confirmation of the amount and date will be given to you at the time of request.

If an error is made in the payment of your Direct Debit, by Market Hall 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 Market Hall Veterinary Group ask you to.

You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation maybe required. Please also notify us.