



**The Sandhills Spay Neuter Veterinary Clinic (SNVC) Intake Form**  
**Phone: (910) 725-8188 Email: Info@spayurpet.org**



<b>Owner First Name:</b>		<b>Owner Last Name:</b>		<b>Email:</b>	<b>Patients Name:</b>
Cat <input type="checkbox"/>	Dog <input type="checkbox"/>	<b>Has your pet had a litter of kittens or puppies?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>			<b>Date of Last litter of puppies or kittens:</b>
<b>Male:</b> <input type="checkbox"/>	<b>Female:</b> <input type="checkbox"/>	<b>Color:</b>	<b>Breed:</b>	<b>DOB or Age of Patient:</b>	
<b>Address:</b>		<b>City:</b>	<b>State:</b>	<b>Zip:</b>	
<b>County</b>	<b>Home Phone:</b>	<b>Cell Phone:</b>	<b>Work Phone:</b>		
<b>Where Did you hear about the Sandhills Spay Neuter Veterinary Clinic (SNVC)?</b> Newspaper <input type="checkbox"/> Friend/Family member <input type="checkbox"/> Animal Welfare Group <input type="checkbox"/> Radio <input type="checkbox"/> Pet Food Giveaway <input type="checkbox"/>					
<b>The Sandhills Spay Neuter Veterinary Clinic (SNVC) employs qualified staff and uses approved materials for all surgical procedures. It is important that you understand that the risk of injury or death, although low, is always present just as it is in human surgery. Carefully read and understand the following before signing your name.</b>					

I, acting as owner or agent of the patient named above, hereby request and authorize SNVC to perform an operation for sexual sterilization of the animal above. I understand that any anesthetic/surgical procedure, including surgical sterilization, presents a degree of risk to the patient and, though minimal, may result in injury or death. I certify that my animal is in good health. I understand the inherent risks of failing to maintain current vaccinations and waive all claims arising out of or connected with the performance of this operation or due to such failure. I understand that some factors significantly increase surgical risk, including but not limited to, pregnancy, presenting in heat, and diseases such as Feline Immunodeficiency Virus (FIV), Feline Leukemia, and heartworm disease. I understand that if my pet has a pre-existing condition, clinical or subclinical, this condition may be worsened by anesthesia and/or surgical sterilization. I understand that if my animal is pregnant, the pregnancy will be terminated at the time of surgery. I understand that SNVC has the right to refuse service to any animal determined to be ill or at an increased risk for surgery. **Sick animals are at higher risk for anesthetic and surgical complications, as well as pose a risk to other animals in the clinic.**

I understand that SNVC may not perform a complete physical examination before surgery is performed. I also understand that my animal will not receive pre-operative bloodwork and I waive my right to have this service performed prior to surgery.

I certify that my animal has had no food since 12:00 midnight the evening prior to surgery (excluding pets less than 4 months old).

I understand that if my animal has an open umbilical hernia, it may be repaired at the time of surgery for an additional fee. I understand that if my male Pet is a cryptorchid there will be an additional fee for surgery.

I understand that if I do not retrieve my Pet at the agreed upon time that SNVC will exercise their right to turn the animal over to the nearest animal control center, humane society, or dispose of as deemed just and proper as allowed by the State of North Carolina under G.S. 90-187.7(a). **Owners of Pets left after closing at 5:00PM will be charged a \$25.00 per hour late fee. Owners dropping Pets off past the intake time of 8:00AM will be charged a \$25.00 late drop off fee. SNVC will not accept Patient drop off after 8:30AM. I understand that payment in full is required at the time services are rendered.**

I understand that under no circumstances will the Sandhills Spay Neuter Veterinary Clinic (SNVC) pay for services received at another veterinary clinic, whether or not the services are related to a surgery done at the Sandhills Spay Neuter Veterinary Clinic (SNVC).

I understand that if my Pet is a female, there will be a small permanent tattoo next to the incision indicating sterilization.

I understand that if the Sandhills Spay Neuter Veterinary Clinic (SNVC) has any questions regarding your Pet or there is a reason for concern or increased risk with surgery noticed prior or during surgery, SNVC will attempt to reach the owner at the numbers listed above. **IF THE OWNER IS NOT REACHABLE BY 10AM ON THE DAY OF SURGERY, I UNDERSTAND THAT MY PETS SURGERY MAY NOT BE DONE and you will need to reschedule your appointment.**

I authorize SNVC and the Companion Animal Clinic of the Sandhills Foundation to use photos of my Pet taken at SNVC for advertisement and social media purposes.

**I hereby release the Companion Animal Clinic of the Sandhills Foundation (CACF), the Sandhills Spay Neuter Veterinary Clinic (SNVC), all veterinarians, technicians, assistants, employees, volunteers, and directors from any and all claims arising out of or connected with the performance of this procedure or any adverse reactions from vaccinations. I agree that I have not and will not claim any right of compensation from any of the above, or file action by reason of such sterilization or attempted sterilization of such animal or any consequences related thereto. Owner/agent hereby agrees to hold SNVC unaccountable for any damages caused during the transportation of the animal, or for any damages caused by any unforeseeable events including fire, vandalism, burglary, extreme weather, natural disasters or acts of God.**

**Please check if you are:**

Requesting a Rabies Vaccine at an additional fee of \$10.00     Requesting a Microchip at an additional fee of \$25.00

Requesting an Ear Tip (Feline only)     Bravecto flea/tick prevention 3-month supply \$45.00

**Please list any past surgeries your pet has had:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_