



Kitten Wellness Plan

Get your Kitty started in the right direction with a Kitten Wellness Plan. This plan includes everything your kitten needs for wellness during their first year.

Here is what is included in your Kitten Wellness Plan

- First Kitten visit
- Kitten vaccination series as recommended by your veterinarian:
 - Purevax Feline Distemper/Respiratory Complex Combo Vaccine
 - Purevax 1 yr Rabies Vaccine
- FeLV/FIV/Heartworm test
- Discount on Feline Leukemia vaccination series
- A gift of a 30-day Trupanion Insurance plan
Offer available at first appointment upon request. Must be accepted within 24 hrs.
- Ear Smear Analysis
- One additional Urgent Care or Office visit
- 1 Intestinal Parasite Fecal Test and 1 Fecal float & Direct smear
- 3 Nail Trims
- First dose Nexgard Combo (Ear Mite/Flea/Tick/Heartworm and Parasite Preventative)
- Microchip placement and Lifetime Registration (Home Again)
- Spay or Neuter (*Includes pre-surgical bloodwork, pain medication and e-collar*)
Does not include, cryptorchid, hernia repair or baby teeth extraction fees
- Additional 10% discount on other products and services (*food and grooming not included*)
- Total cost of the plan is \$660
- Over \$200 in Savings
- One time enrolment fee of \$49.00 (Waived if paid in full)

* Financing of your kitten's wellness plan is available through VetBilling. This is an auto draft of your monthly payments from your checking account. We will process your application and have you sign the contract electronically. Your account can be accessed at <https://vetbilling.com/>

*** I acknowledge that my pet's account at Dakota Pet Hospital must stay current to receive wellness plan services. **Any unused Wellness plan services will be forfeited if not used within the first 12 months of the date Kitten Plan begins.** I recognize that I have until my pet's second visit to sign up for the Wellness Plan. Kittens enrolled at their second visit are not eligible for financing through VetBilling and the plan must be paid for in full *** Adult services not included

Client Signature: _____ Date: _____

Printed name _____