

Membership Application Form

Administered by The Animal Health Care Company



About your pet

Is your pet a Dog Cat

Your pet's name _____

Date of birth Male Female

Breed type _____ Weight _____ kg

To be completed by veterinary practice

Plan Code/Patient ID _____

Branch _____ Post Code _____

Name _____ Position _____

Signed _____ Date _____

About you

Title (Mr/Mrs/Miss/Ms) _____ Surname _____ Other names _____

Address _____

_____ Postcode _____

Contact telephone number _____ E-MAIL address: _____

Amount you are paying

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

x monthly payments of £ (inc. VAT)

Your first payment will be collected 14 days after we have received your application. If you have a preferred day of the month for your payments please enter it into this box:

Declaration and signature

I declare that the information I have given in this application is true and complete. I accept the terms and conditions issued by the Animal Health Care Company Ltd for the provision of the agreed routine healthcare plan from the Veterinary Practice named on this application. I am 18 years old or over.

Signature _____

Date _____

DATA PROTECTION

We will store your details on computer to administer your membership plan but will not keep them longer than necessary. We may use your details to support the development of our business by including them in customer surveys. Under the Data Protection Act, you are entitled to a copy of the information we hold about you and we are entitled to ask you to pay for this.

We may also provide you with information about products and services of selected companies we believe may interest you. If you do not want to know about these products and services please tick this box:

Instruction to your Bank or Building Society to pay Direct Debits.



Originator's Identification Number

8 3 7 4 7 3

The Animal Healthcare Company Ltd, 4 Bridge Road Business Park, Haywards Heath, West Sussex RH16 1TX

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

To: The Manager _____

Bank or Building Society _____

Address _____

Postcode _____

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

3. Bank Sort Code (from the top right corner of your cheque) _____

4. Bank or Building Society A/C Number (normally 8 digits) _____

5. The ANIMAL HEALTH CARE reference (for office use only) _____

6. Instruction to your Bank or Building Society
Please pay Animal Health Care Limited 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 Animal Health Care Limited and if so, details will be passed electronically to my Bank/Building Society.

Signature(s) _____

Date _____

Terms and Conditions of your Healthy Pet's Plan ("Your Plan")

These terms and conditions, the Application Form and the Information Leaflet ("Terms") form the basis of our contract with you, the pet owner ("you", "your"). We strongly advise that you read through them carefully and keep them in a safe place, so that you can refer to them in the future.

Your Plan is administered by THE ANIMAL HEALTHCARE COMPANY LTD, 4 Bridge Road Business Park, Bridge Road, Haywards Heath, West Sussex RH16 1TX (referred to in these Terms as "we, us, our").

We collect payments on behalf of named on your Membership Application Form ("Your Vet") to pay for Your Plan.

Treatment

1. The treatment paid for by Your Plan entitles the pet you name on your Application Form ("Your Pet") to receive specified routine preventative healthcare services and treatments required to maintain Your Pet's health, as prescribed by Your Vet and as described in the Information Leaflet ("Treatment").

2. Your Plan entitles Your Pet to receive Treatment at Your Vet only. If you choose for Your Pet to receive treatment provided by a different veterinary practice, it will not be covered by Your Plan.

3. Products prescribed by Your Vet must be used in accordance with the instructions and must not be used on any pet other than the one to which it has been prescribed. If Your Pet is sensitive or allergic to the products prescribed under Your Plan, substitute products may be available, which may result in an additional charge. This can be discussed with Your Vet.

Payments and your Direct Debit

4. By entering into Your Plan you are agreeing to pay an initial payment, followed by 11 equal monthly payments by direct debit, the first of which will be requested 14 days after the initial payment is paid to us. If you do not pay your monthly installments we reserve the right to terminate Your Plan and collect from you the sum equal to the difference between the value of Treatments received and the value of the payments made by you.

5. If you need to change the date for payment collection, you should contact us by telephone (0844 800 8548) or by email (info@animal-healthcare.co.uk) at least THREE working days prior to the due date for collection. There will be not charge to change your due date for collection.

6. If any of your direct debit payments are returned to us unpaid by your bank, we will inform you and will arrange a subsequent attempt to collect the payment from your bank account. If this happens, we will charge you an administration fee of £10.

7. If two or more attempts to collect your direct debit payments are returned to us unpaid by your bank, we reserve the right to terminate Your Plan and collect from you any unpaid amounts for Treatments Your Pet has received.

8. You must pay the monthly direct debit payments until either all of the monthly installments have been paid by you or until Your Plan is terminated in accordance with clause 9 above. We will not refund fees paid or payable by you except in the case of our administrative error (in our reasonable opinion) or the death of Your Pet, in which case we will only refund sums you have already paid for which Your Pet has not received Treatment.

9. If Your Pet's weight changes and as a result they move into a higher or lower weight threshold, we reserve the right to increase or decrease your fee accordingly by providing at least 28 days' notice in writing. The new fee will be payable by you during the remainder of Your Plan. We reserve the right to change the weight thresholds by giving you at least 28 days' notice in writing.

10. Your Vet reserves the right to review and increase your monthly direct debit payments by giving you at least 28 days' notice in writing. The new direct debit payments shall apply following your renewal of Your Plan.

Term and termination

11. Your Plan is an annual contract and we will write to you no later than 28 days prior to the expiry of Your Plan to offer you continuation terms on behalf of Your Vet - there is a one of fee of £1.50 which will be added to the first due payment of your renewed plan. If you do NOT wish to renew Your Plan for a subsequent year, then you should notify us at least 7 days prior to the expiry of Your Plan. Otherwise, we will assume you want to continue with Your Plan and we will renew it accordingly.

12. If you fail to keep up with the payments under Your Plan, we will terminate it in accordance with clause 7 above.

13. If you change your mind and wish to cancel Your Plan, you have 14 days from paying the initial payment in which to do so. You should contact us in writing at the address above. The initial payment is non-refundable, but we will cancel Your Plan and will not request any direct debit payments. You will be liable to pay to Your Vet the value of any Treatments received. If you wish to cancel Your Plan after 14 days, you will be liable for the outstanding amounts due until the end of the year.

Conditions

14. You MUST be over 18 years of age.

15. Your Plan may not be transferred either from Your Pet to another pet, or from you to a third party.

16. THIS IS NOT AN INSURANCE POLICY.

17. These Terms are subject to English law.

18. No other discount may be used at the time of application to reduce the price of Your Plan.

19. You can not enter into a New Plan and Your existing Plan is not available to you if you have an outstanding Balance with Your Vet. All new Plans are subject to our acceptance of your Application Form and we reserve the right to refuse to enter into Terms with you.

Your Responsibilities

20. The weight of Your Pet entered on your Membership Application Form will be the weight used to determine the fee category Your Pet falls into, subject to any changes in accordance with clause 9.

21. You are responsible for ensuring Your Pet attends Your Vet regularly and that you comply with the advice and treatment Your Vet prescribes for Your Pet.

22. If your personal details change, you should notify Your Vet immediately.

23. If Your Pet is lost or deceased, you should notify Your Vet who will contact us to cancel Your Plan.

Disputes

24. If you have any problems with the administration of Your Plan or if you have any questions about these Terms, please contact us by telephone: 0844 8008548; or email: info@animal-healthcare.co.uk.

25. If you are unhappy with the Treatment or any aspect of Your Pet's veterinary care, you should contact Your Vet.

Use of your Personal Information

26. Personal information which you give us may be used by Your Surgery to process your orders, let you know about promotions and new products and for statistical analysis. Please let us know if you do not wish for us to use your information in this way.

The Direct Debit Guarantee



This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the scheme is monitored and protected by your own Bank or Building Society.

If the amounts to be paid or the payment dates change, Animal Healthcare Ltd, will notify you ten working days in advance of your account being debited or as otherwise agreed.

If an error is made by Animal Healthcare Ltd, or by your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.

You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us.