



HOSPITAL ADMISSION AGREEMENT

Today's Date: ____/____/____

Owner's Name: _____ Pet's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number(s) Where You Can Be Reached Today: 8a-12p _____

12p-5p _____ 5p-7p _____

Agreement made at Long Branch, NJ on the above date between the Long Branch Animal Hospital at the below address, party of the first part, and the person named above, who represents himself or herself to be the owner of the animal herein described, party of the second part, herein after called the owner.

I. The Long Branch Animal Hospital agrees to receive from the owner the above described animal and to give it such medical and surgical care as it may deem advisable.

II. The owner hereby agrees to pay the Long Branch Animal Hospital the sums specified below, or if none is specified, a reasonable sum for the medical and/or surgical treatment of the animal described above herewith entrusted to its care.

III. The owner agrees to obtain the release of the animal from the Long Branch Animal Hospital within three days after a request for the discharge is made. The request may be made personally, by telephone, or by letter mailed to the owner at the address given above. Should the animal not be discharged within the specified time, the owner hereby relinquishes all claims to the animal and the Long Branch Animal Hospital is at liberty to make whatsoever disposition of the animal as it may see fit. The financial indebtedness incurred by the owner will still be obligated and payable to the Long Branch Animal Hospital.

IV. In the event of death, and the owner desires the body of the animal, said body must be removed within twenty-four hours after being notified. Notification of death of the animal shall be made in person, by telephone, or by letter mailed to the owner at the address above. Otherwise, the Long Branch Animal Hospital will dispose of said body together with any collar or harness left with the animal.

V. The owner gives permission to the Long Branch Hospital to perform such diagnostic procedures; to administer such treatment and to perform such surgery as deemed advisable by the staff veterinarians at the Long Branch Hospital.

VI. The owner realizes that in many cases it is impossible to determine in advance the extent of medical and/or surgical treatment required for an animal. However, the staff of the Long Branch Animal Hospital will attempt to estimate the cost for services. It is understood that the actual cost may exceed or be lower than the estimate for any given animal.

In witness whereof the owner has duly signed, and the Long Branch Animal Hospital has caused its name to be signed to this agreement in duplicate.

For the Long Branch Animal Hospital:

For the Owner:

Treatment Plan cost is between \$_____ and \$_____

224 Second Avenue · Long Branch, NJ 07740

Phone: (732) 571-4100 · Email: info@longbranchanimalhospital.com

www.longbranchanimalhospital.com