

Paradox Low Cost Spay/Neuter Clinic Admission

Owner Information

Please Print Clearly

Date: _____
Name: _____ Address: _____
City: _____ Zip: _____ County: _____
Home # _____ Cell/Work # _____
E-Mail Address _____

Pet Information

Pet Name _____ Dog _____ Cat _____ Male _____ Female _____
Breed: _____ Age: _____ Weight: _____
Description: _____
Do you have other animals that need to be fixed? Yes or No How many: _____

Dog Spay: \$65 Neuter: \$60 **Cat** Spay: \$55 Neuter: \$35

ALL surgeries include pain medication.
In heat or pregnant \$15 to \$25 EXTRA
Over 50 lbs \$10 Over 70 lbs \$20 EXTRA

Vaccines & Testing (optional)

Dog: DHPP \$15 _____ Rabies \$10 _____ Heartworm Test \$20 _____
Cat: FVRCP \$15 _____ Rabies \$10 _____ Felv/Fiv Test \$30 _____
Microchip: \$25 _____ Nail Trim \$5 _____ Nail Grinding \$10 _____

Male Dogs

May require E-Collar \$5 - \$10

Female Dogs

I give my permission to have my female dog spayed even though she may be in heat. I understand that if my animal is in heat that I am required to keep her away from **ALL** males for 10 days after surgery. (Please initial) Yes _____ or No _____

Anesthesia Release

I understand there are risks associated with anesthesia and surgical procedures. I give my permission to have my pet(s) listed above surgically sterilized.

Signature: _____ Date: _____

Payment is CASH ONLY due at time of pick up.

Total Paid \$ _____