H.E.L.P. Animals, Inc. LOW COST PET SHOTS 501(c)3

P.O. Box 740514, Orange City, FL 32774-0514 386-775-4966

Rabies Tag #_____

Owners Name:

_____

Last **First**

Pet's Name:_____

Dog Vaccine:
Distemper
Parainfluenza
Adenovirus 2
Parvovirus
Coronavirus
$9

Rabies:
$6

Deworming:
$5

Cat Vaccine:
Panleukopenia
Rhinotracheitis
Calcivirus
Chlamydia

Feline Leukemia:
$15

Bordetella/Kennel Cough:
$15

Tapeworm: **Cat:** up to 10 lbs..... **$12**
Over 10 lbs.....**$18**
Dog: up to 10 lbs.....**$12**
11 to 50 lbs.....**$18**
Over 50 lbs..... **$27**

Total Paid:
$

Allergic Reactions may occur in some animals, therefore, I understand that I will be responsible for any and all expenses incurred if this happens.
The undersigned does hereby agree to indemnify and hold harmless: H.E.L.P. Animals, Inc., their agents, volunteers, assigns or heirs, Dr. Ed Rudinski, DVM, the County, Local or City Governments within the State of Florida or any organization or person affiliated with the H.E.L.P. Animals, Inc. Low Cost Pet Shot Clinics, from any and all claims for personal injury or damaged property resulting from my (our) participation in this event. **I also Understand that this is a "Limited Veterinary Practice" and I must visit a Full Service Veterinarian for all other services, such as a Complete Physical and Testing.** I sign below as the registered adult owner of the above named pet.....

Signature:_____

A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll free 1-800-435-7352 within the State of Florida or 1-800-498-2221 outside the State of Florida. Registration does not imply endorsement, approval or recommendation by the State. Chapter 496, Florida Statutes requires the following information: (1) Our Registration Number is: CH19432, (2) No contribution made to our organization is retained by a professional solicitor, (3) Our organization receives 100% of the contribution.