



UMBRELLA
DENTAL SOLUTIONS

Greenleaf Animal Hospital (Feline) Wellness Plan *Serviced By Umbrella Dental Solutions*
ACCOUNT EXECUTIVE Click to select

KITTEN \$29.99 MONTH	FELINE (ADULT) \$29.99 MONTH
<p>Additional VIP Benefits *3 BATHS A YEAR WITH EXAM (APPOINTMENT ONLY) *2 FREE DAYS OF BOARDING (1 DAY PER SIX MONTHS) CALL IN ADVANCE SPACE IS LIMITED. *DISCOUNTS ON TREATMENT</p> <p>2102#1 VACCINE WITH EXAM (FVRCP #1) 6-8WKS 6461 FELINE LUEKEMIA/AIDS/HEARTWORM TEST 3001 DEWORMER 7018 FECAL FLOAT 6002 NAIL TRIM 1006 BIOMEDICAL WASTE FEE</p> <p>-----</p> <p>2102#2 VACCINE WITH EXAM (FVRCP #2) 9-11WKS 6002 NAIL TRIM 3001 DEWORMER HWS HEART WORM PREVENTION 1DS</p> <p>-----</p> <p>2102 #3 VACCINE WITH EXAM (FVRCP #3) 12-14WKS 25746 RABIES FELINE PUREVAX VAC 6002NAIL TRIM 20% OFF SPAY/NEUTER (LASER ADD) 20% OFF LABWORK 20% OFF DENTAL SERVICES 20% OFF RADIOGRAPHS EXCLUDES MEDS, PRODUCTS OR FOOD.</p>	<p>Additional VIP Benefits *2 BATHS A YEAR WITH EXAM (APPOINTMENT ONLY) *2 FREE DAYS OF BOARDING (1 DAY PER SIX MONTHS) CALL IN ADVANCE SPACE IS LIMITED. *DISCOUNTS ON TREATMENT</p> <p>2104 #1 FELINE ANNUALS FVRCP W/EXAM 25746 RABIES FELINE PUREVAX VAC 7018 FECAL FLOAT 6461 FELINE LUEKEMIA/AIDS/HEARTWORM TEST 1006 BIOMEDICAL WASTE FEE</p> <p>-----</p> <p>1001#2 ROUTINE EXAM 2695 IDEXX COMPL CHEM PROFILE 7018 FECAL FLOAT 6002 NAIL TRIM</p> <p>20% OFF SPAY/NEUTER (LASER ADD) 20% OFF LABWORK 20% OFF DENTAL SERVICES 20% OFF RADIOGRAPHS EXCLUDES ON MEDS, PRODUCTS OR FOOD.</p>

Terms and Conditions

- 1. Not an Insurance Plan:** Wellness Plan is not an insurance, discount plan and is solely owned by your VETERINARY HOSPITAL. Umbrella Dental Solutions is a third party servicer of your payment. ANIMAL HOSPITAL and UDS in no way represents the Wellness Plan as an insurance or a consumer discount plan. UDS does not own or sell Wellness Plans either to the public or to dental patients. By purchasing the Wellness Plan you agree to the terms and conditions set forth herein.
- 2. Term and Payments:** The term is 12 months. By purchasing the Wellness Plan you are hereby entering into a legal and binding contract between you and the VETERINARY HOSPITAL you purchased this Wellness Plan from. Your contract obligation is 12 months for a total of \$359.88, annually. Payments will be automatically debited from plan holder's bank account from subscribers check at time of purchase. Payments automatically debited from plan holders account in the form of ACH or MCH will be debited from your account from Umbrella Dental Solutions 12 times (once a Month) renewing automatically unless plan subscriber notifies Umbrella Dental Solutions an dentist owning Wellness Plan within 60days of plan anniversary.
- 3. Termination:** In the event that the Wellness Plan is in default by non-payment, The Wellness Plan will be terminated. Upon termination, the subscriber will be responsible for 100% of dental practices UCR. If subscriber at any time reinstates Wellness Plan within the original 12 month term, patient will be responsible for unpaid previous months from start date of current subscription.

KITTEN

FELINE

Accepted By: _____
Signature Date

Printed Name Date

Account Executive: _____
Signature Date

ANIMAL HOSPITAL (Name Of Practice)