

For Financial Assistance Call the Washington Co. Humane Society at (423) 926-8533

Northridge Veterinary Clinic
3125 Bristol Highway
Johnson City, TN 37601
(423) 282-2691
Office Hours: Mon-Fri 8:30-6:30 Sat 8:30-12:00

Mary Ann Ensminger, DVM

Phil D. Ensminger, DVM

Low Cost Spay & Neuter Program

Northridge Veterinary Clinic offers this Spay/Neuter program in cooperation with the Washington County/Johnson City Animal Control Center. It is open to anyone needing low cost assistance. Please complete this form before making an appointment. Please bring all current vaccination and medical records to you appointment. Due to the risks posed by communicable disease we strongly recommend that dogs are current on distemper/parvo and bordetella vaccinations and cats are current on distemper.

Please have all dogs on a leash and all cats in a carrier!

All pets will receive a physical exam prior to surgery and any pets deemed unfit may be diagnosed/treated/hospitalized at the owner's discretion. Normal clinic charges will apply. All pets will be given a one-year rabies vaccination if needed. If the animal is in heat, pregnant, has excess fat or mature organs there will be an **additional charge or no more than \$50** for increased time and supplies. If the pet is five years of age or older there may be an **additional charge of \$20 for fluids**.

--Cost of Surgery & One-Year Rabies Vaccination--

	Male Cats: \$65	Female Cats: \$75
Dogs	Male	Female
1-30 lbs.	\$75	\$90
31-60 lbs.	\$80	\$95
61-90 lbs.	\$85	\$100
91+ lbs.	\$90	\$105

Name: _____ Pet's Name: _____

Address: _____

City/State/ZIP: _____ Phone: _____

Dog Cat Male Female Breed: _____ Color: _____

Northridge Veterinary Clinic has my permission to perform sterilization surgery and administer a rabies vaccine to my above-described pet. I understand that failure to pick up my pet at the designated time of discharge may result in additional boarding fees. I understand that there is a risk to any surgery and release Northridge Veterinary Clinic of any liability.

Signature: _____ Date: _____

Surgeries Admitted at 9:00 and Discharged Between 4:00 and 5:30