

Financial Responsibility Contract

This contract exists between Mr. and Mrs. _____ and Surgi-Care Center for Horses.

It is understood and agreed upon between the above parties that the following financial contract is mutually acceptable, legal, and binding. I (We) agree to pay Surgi-Care Center for Horses the principal amount of _____ plus interest (1-1/2% per month) and/or billing fees (\$5.00 per month) whichever is greater. I (We) agree to make _____ monthly payments, on or about the 20th day, via an electronic bank debit of \$ _____, or a monthly credit card payment of \$ _____ including interest and/or billing fees.

In the event that the agreed upon monthly payment is unable to be processed due to lack of funds or unavailable credit by the respective bank, I (We) agree to pay a \$35.00 failed transaction fee. I (We) agree to pay the \$35.00 fee along with the monthly amount due within 10 days of the failed transaction finance charges and billing fees. The payment is to be made directly to Surgi-Care Center for Horses. Failure to do so will cause the entire amount of this contract to be due in full 11 days after the failed monthly transaction fee date.

I (We) agree to pay any and all costs incurred in collecting any outstanding balances including costs, courts costs, attorney fees, and prejudgment interest. **COLLECTION OF UNPAID ACCOUNTS WILL BE VIGOURSLY PURSUED. SURGI-CARE CENTER FOR HORSE WILL SEEK ALL CIVIL AND CRIMINAL LEGAL REMEDIES AVAILABLE UNDER THE LAW.**

I (We) have read the above contract and agree to be bound by it and abide by it completely. I (We) voluntarily and willingly enter into this agreement.

Bank Name: _____

Routing Number: _____

Account Number: _____

Date: _____

Signature of Responsible Party (Parties): _____

Representative of Surgi-Care Center for Horses: _____
