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www.vetmarlborough.co.nz

EasyPet Plan Application

Name: _____

Address: _____

_____ Post code: _____

Home Phone: _____ Mobile Phone: _____

E-mail address: _____

(for statements, occasional newsletters or reminders)

Any information you give to The Vet Centre will be held with the utmost care.

We will NEVER give, lease, sell or otherwise disclose your personal information to a third party.

Amount \$ _____

Payment frequency: Weekly Fortnightly Monthly

First payment date: _____

Signature: _____ Date: _____