



Dr. med. vet. Nina Eberle  
Ruth Höinghaus Ph.D.  
Dr. med. vet. Verena von Babo

**VetSpezial**  
Zentrum für Kleintiermedizin

■ Onkologie  
■ Diagnostik  
■ Chirurgie  
■ Innere Medizin

Welcome to the veterinary practice “VetSpezial”

Information about the owner / client:

First name:	Last name:
Street:	Door number:
Postal code:	City:
E-Mail:	Tel. private:
Tel. mobile:	Tel. business:

If you were referred/recommended to us by your veterinarian, please enter it here.

Name of the vet:
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Informations about your cat:

Name:	Breed:
Gender: <input type="radio"/> male <input type="radio"/> female	altered: <input type="radio"/> no <input type="radio"/> yes, when?
Date of birth:	Fur color:
Outdoor cat keeping: <input type="radio"/> yes	Indoor cat keeping: <input type="radio"/> yes
Household with multiple cats: <input type="radio"/> yes	Individual housing: <input type="radio"/> yes
Pet health insurance <input type="radio"/> no <input type="radio"/> yes:	
Pet health insurance certificate number:	

I confirm that I am the owner of the cat and therefore authorized to enter into a contract for the provision of the required services by the veterinary practice „VetSpezial“. If I am not the owner of the cat, I confirm that I am acting on the express instructions of the pet owner. If authorization is lacking, or if the pet owner denies authorization, I hereby confirm that I will cover the costs incurred for the treatment.

To the extent necessary to determine the diagnosis, I authorize the veterinary practice „VetSpezial“ to use the services of third parties (laboratories, specialized testing facilities, etc.) in my name and at my expense. Assistance with the treatment of the cat is voluntary and, to the extent permitted, excluding any liability.

**I will pay the incurred treatment fees and medications in cash, by debit card, or credit card (€500 or more) after each treatment.**

Non-binding cost estimates are also provided exclusively in writing. Any verbal price quotations are only approximate and are not binding under any circumstances.

**By signing page 2, I confirm the accuracy of my personal information above, authorize the examination and treatment, and if necessary, surgery, of my cat, and acknowledge the contents of the registration form.**

**VetSpezial**

Zentrum für Kleintiermedizin  
Dres. von Babo-Eberle-Höinghaus GbR  
Im Kornfeld 7  
31275 Lehrte - Ahlten

**Bankverbindung**

Volksbank Lehrte eG  
BIC: GENODEF1PAT  
IBAN: DE43 2519 3331 8006 8995 00

**USt-IdNr.**  
DE303776520

**Kontakt**

www.VetSpezial.de  
Mail@VetSpezial.de  
Tel: 05132 94 64 240

**Kontaktzeiten**

Mo - Fr 09:00 - 13:00 / 15:00 - 18:00 Uhr

### General data protection information:

The practice's data protection officer is Mr. Hendrik Baumann (Datenschutz@VetSpezial.de). Our veterinarians and our non-veterinary staff are bound to professional secrecy based on:

- Section 203 of the German Criminal Code (StGB), breach of privacy,
- Section 17 of the German Unfair Competition Act (UWG), betrayal of business and trade secrets,
- the special confidentiality regulations of our practice.

Confidentiality includes the circumstances of the establishment of the patient relationship and all information that the patient's owner provides us within the scope of the patient relationship regarding themselves or their cat, or their use, condition, pre-existing conditions, or previous veterinary treatments. Please note that an attorney-client relationship is not established simply by submitting an inquiry. Nevertheless, we will also treat information resulting from such inquiries confidentially.

All staff working for our practice are familiar with data protection and confidentiality regulations and have been trained accordingly. We electronically store the personal information you provide, your cat's data and medical history, all findings from our examinations, including the results of imaging procedures and treatments, as well as all invoicing and payment data. Naturally, we do not share any data with third parties without appropriate authorization. An exception to this is referrals from veterinary colleagues, as we inform colleagues about our examinations and treatments by telephone and in writing to ensure a complete medical history for your cat's future care. By entering your details under the „referred/recommended veterinarian" heading and signing, you authorize us to do this.

I acknowledge Burgdorf as the place of jurisdiction for all disputes.

Should any provision of this contract be invalid or unenforceable, the validity of the remaining provisions of this contract shall remain unaffected. This provision shall be replaced by one that most closely reflects the economic intent of the contracting parties. The same applies in the event of a gap in the contract.

### Declaration of consent to the use of data for further purposes

By signing this form, I consent to the veterinary practice VetSpezial collecting my personal data provided on the registration form for the purpose of executing a veterinary treatment contract based on legal authorization.

Any further use of personal data and the collection of additional information, as well as any forwarding to third parties, generally requires your consent. You can voluntarily grant such consent below.

### Consent to the use of data for further purposes (please tick)

- I agree that the collected data may also be used for future treatment contracts.
- I agree that the collected data may be transmitted to special laboratories.
- I agree that the veterinary practice VetSpezial may inform me about examination results and appointment scheduling by telephone, email or post.
- I agree that the collected data may also be used in accordance with its intended purpose, including in the event that the practice is continued by a successor.

**I have read the information on electronic data processing and storage and consent to the processing and electronic storage of my data. If you do not agree to the procedures described here, we unfortunately cannot treat your animal, as in this case we would not be able to comply with legal regulations, including those contained in Sections 611 et seq. of the German Civil Code (BGB), Section 14 (4) of the German Value Added Tax Act (UStG) in conjunction with Section 33 of the German Value Added Tax Implementation Ordinance (UStDV), and professional regulations.**

Date	Signature
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This consent can be revoked or modified at any time without giving reasons for the future. The revocation must be sent to us by post or email. However, a consequence of the revocation may be that we can no longer continue the treatment relationship or can no longer continue it to the same extent as before.