

Tel. 0711-762494 info@kleintierpraxisamhaigst.de www.kleintierpraxisamhaigst.de

Patient enrolment certificate

(As at: April 2018)

We request the following information for our patient file in accordance with legal requirements: (please complete in capital letters)

Client name:		
Street:		
Zip code/City:		
Telephone:	Mobile:	
Email (only necessary when invoice	s/vaccination reminders/laboratory results m	ay be sent by email):

Patient:

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Species: O Dog O Cat O Other:
Breed:
Name of the animal:
Date of birth:
Gender: Om Ow Oneutered
Colour/Special features:
Pretreatments/medicines:
Referred by
Veterinary insurance: O no O yes, with which company:



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Treatment contract

I declare that I am the owner of the animal and therefore entitled to conclude a contract for the performance of necessary treatments and operations, and I further declare that I am willing and able to bear the resulting costs. In this context I declare that at the time of this declaration I am not involved in any judicial debt proceedings and that the debtor register of the local court responsible for me does not contain any entries concerning my person.

Insofar as I am not the owner of the animal, I assure that I will act on the express instructions of the owner of the animal. If there is no power of attorney or if the pet owner denies a power of attorney, I hereby confirm that I will bear the costs arising from the treatment.

If it is necessary for diagnosis, I authorise the owner and the employees of the Practice to make use of the services of third parties (laboratories, special research institutes, etc.) in my name and for my account.

I will pay the resulting costs immediately in cash or by EC card. I am aware that the practice has a right of retention over the animal treated if I am not willing or able to pay the costs incurred by the treatment of the animal in cash or by EC card.

X Place/Date:______ Signature:_____



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Declaration of consent for the use of data for other purposes

(As at: April 2018)

Tierärztliche Praxis Kleintierpraxis am Haigst Dr. Stephan Schroth & Colleagues Alte Weinsteige 100, 70597 Stuttgart Telephone: 0711-762494 E-Mail: info@kleintierpraxisamhaigst.de

With my signature I agree that the veterinary practice 'Kleintierpraxis am Haigst' (responsible party: Dr. Stephan Schroth) collects my personal data provided on registration for the purpose of implementing a veterinary treatment contract on the basis of legal rights.

Periodical consent is required for any further use of personal data and the collection of additional information, as well as for forwarding to third parties. Consent can be given voluntarily through the following:

Consent to the use of data for further purposes

(Please tick)

- I agree that the data collected may also be used for future treatment contracts.
- I agree that the collected data may be transferred to other veterinary practices and clinics as far as necessary and necessary within the scope of veterinary referrals.
- I agree that the collected data may be transmitted to examination laboratories and institutes as far as is necessary and within the scope of further diagnostics.
- I agree that the veterinary practice 'Kleintierpraxis am Haigst' may inform me by telephone about laboratory results and scheduling.
- \circ I agree that the veterinary practice 'Kleintierpraxis am Haigst' informs me by post.
- I agree that the data collected may continue to be used as intended by a successor within the framework of a continuation of the practice.



Signature _____



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Privacy Notice

The protection of your personal data is important to us. We process your data exclusively within the scope of legal regulations (EU General Data Protection Regulation, Federal Data Protection Act).In the following, we inform you about the most important aspects of data processing on our website.

Collection and processing of data:

We process the data that you provide to us as a customer for the implementation of pre-contractual measures and upon conclusion of the contract. Data processing is carried out for the following purposes: As part of our business relationship, the data provided by you will be processed at least with the aid of partial or predominant automation (e.g. email correspondence, drawing programs) and in the form of archived text documents (e.g. correspondence, contracts, plans, notices, hand files, personalised invoices) in order to carry out pre-contractual measures and fulfil the contract.

Legal grounds of data processing:

Data processing is carried out on the basis of Art. 6 Para. 1 lit. b of the GDPR (contract initiation and performance).We require your data (name and residential address) in order to conclude and carry out an examination/treatment contract and to be able to process it to your complete satisfaction. In addition, data processing is based on Art. 6 Para. 1 lit. f of the GDPR (legitimate interest in marketing and advertising) or Art. 6 Para. 1 lit. a (consent).We would like to inform you, as an interested party, about our services, in particular in the form of vaccination reminders and projects (in particular by organising an "Open House" day).

Data usage:

We only use your data to process the contract, to answer your inquiries, for accounting and billing purposes and for technical administration. Your data will be deleted if it is no longer necessary to fulfil the purpose for which it was stored, or if storage becomes inadmissible for legal reasons. Data that is necessary for billing and accounting purposes will not be affected by a request for deletion. The data cannot be deleted if we are required by law to retain or store the information.

Your rights:

In principle, you have the right to information, rectification, deletion, restriction of processing, data portability, revocation and objection. If you believe that the processing of your data violates data protection law or your data protection claims have otherwise been violated in any way, you can make a complaint to the supervisory authority. This is the address of the State Data Protection Authority

(Der Landesbeauftragte für den Datenschutz und die Informationsfreiheit Baden-Württemberg) P.O. Box 10 29 32, 70025 Stuttgart Königstraße 10a, 70173 Stuttgart Germany Tel.: 0711/61 55 41 – 0 Fax: 0711/61 55 41 – 15 E-Mail: poststelle@lfdi.bwl.de Internet: https://www.baden-wuerttemberg.datenschutz.de).

Your right to limit the processing includes the right to revoke your declaration of consent to the forwarding of your data to third parties.

Our contact details:

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