**2025 Equine Dinner Specials - Order Form**

**Owner Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Attendance is not required; all orders must be received and paid for by Friday, February 28, 2025 by noon.

If you can attend, please RSVP before February 24, 2025.  
**\*\* ALL PRICES INCLUDE SALES TAX\*\*  
\*\*3% credit card fee will be applied on all credit card purchases\*\***

| **Product** | **Special Sale Price** | **Name of Horse(s)** | **Quantity** | **Total** |
| --- | --- | --- | --- | --- |
| Low level: **Vetera E, W, T & West Nile.** Eastern and Western Encephalitis, Tetanus and West Nile *Regular Price: $47.80* | **$39.70**  **(10 or more) $37.30** |  |  |  |
| High level: **Vetera Gold:** E, W, T & West Nile and **Flu/Rhino.** Eastern and Western Encephalitis, Tetanus and West Nile and  Influenza & Rhinopneumonitis *Regular Price: $75.10* | **$62.40**  **(10 or more) $58.60** |  |  |  |
| **Pinnacle I.N.** (Strangles) intranasal – better efficacy/protection  *Regular Price: $44.65* | **$37.05**  **(10 or more) $34.80** |  |  |  |
| **Strepvax:** (Strangles) vaccine IM *Regular Price: $26.35* | **$21.85**  **(10 or more) $20.55** |  |  |  |
| **Rabies.** Must be given by a  veterinarian to be legally  recognized. *Regular Price: $32* | **$30.00 (10 or more) $25.00** |  |  |  |
| **\*\***dewormer**\*\* Zimecterin Gold** Ivermectin/Praziquantel  *Regular Price:$19.40* | **$17.30**  **(10 or more) $16.30** |  |  |  |
| **Wellness Exam:** *Regular cost $55 per horse* | **$44 per horse** |  |  |  |
| **I will TAKE HOME with me FROM THE EQUINE DINNER and administer myself.** *Keep refrigerated until use.* | | | |  |
| **I will PICK UP FROM THE CLINIC (after the equine dinner) and administer myself.** *Keep refrigerated until use.* | | | |  |
| **I would like the vaccine delivered and administered by the veterinarian.  An additional vaccine administration fee of $5 per vaccine will be charged at the time of service -**  **do not include this fee in the total now.**  **I will CALL 715-934-9055 to set up an appointment at a later date.** | | | |  |
| **▢ Check#\_\_\_\_\_\_\_\_\_ ▢Cash ▢ Card TOTAL AMOUNT:** | | | |  |

[**info@leadingedgevets.com**](mailto:info@leadingedgevets.com) **~ 715-934-9055 ~ N10120 County Hwy M ~ Springbrook, WI 54875**