

2025 Zoetis Parasiticides Rebate Promotion Form

Please download this form, print it off and mail it along with your invoice from your veterinary clinic to:

Zoetis Canada Inc. Rebate Promotion 574K5

PO Box 12574 Saint John NB E2L 5R4

First Name: _____

Last Name: _____

Country: **Canada**

Postal Code: _____

Address Line 1: _____

Address Line 2: _____

City: _____

Province: _____

Email Address: _____

Telephone Number: _____

Payment Method: Cheque (Please allow 8 weeks for processing and delivery)

I wish to receive future correspondence from Zoetis Canada Inc. on special offers and product information, including by electronic communications. I understand I may unsubscribe at any time using the links provided in each correspondence by one of the means provided.

YES NO

Language Preference:

ENGLISH FRANÇAIS

How many doses of Simparica® or Simparica TRIO® did you purchase?

6 DOSES 12 DOSES NONE

How many doses of Revolution® PLUS did you purchase?

6 DOSES 12 DOSES NONE

Name of Dog(s) _____

Name of Cat(s) _____

What breed is your pet? _____

Valid from January 1st until December 31st, 2025. Terms and conditions can be found at www.zoetis.ca/parasiticidesrebates

Zoetis® Simparica, Simparica TRIO and Revolution are registered trademarks of Zoetis, or its licensors.

©2025 Zoetis Services LLC. All rights reserved.

For more information e-mail us at rebatetrak@promo-trak.com