

ScribeRx Registration

Once the form is filled the registering veterinarian must sign in order to complete the registration form. In order to protect the prescription process Summit must verify the information provided before setting up the membership. You will be contacted via email as soon as your membership has been activated. This may take up to 2 business days. Regular business hours are Monday to Friday, 9am-5pm ET.

Membership is open to veterinarians only. Professional use only.

Completed forms should be faxed to **1-866-329-7979**.

PRACTICE INFORMATION

Practice Name*

Practice Email*

Practice Type*

Small animal

Equine

Mixed (small animal & equine)

Address Line 1*

Address Line 2

City*

Province*

Postal Code*

Practice Phone*

Practice Fax

VETERINARIAN INFORMATION

First Name*

Last Name*

License Number*

Province of License*

Individual Email*

Personal Cell

Preferred Username

Registering Veterinarian Signature*

We cannot process your application without receiving a signed application form.