

WELCOME TO OUR PRACTICE!!

Thank you for giving us the opportunity to care for your pet. Please help us meet your needs better by taking a moment to share some important information we will need as we support your pet's needs today and in the future.

PLEASE PRINT IN ALL SPACES.

CLIENT'S NAME _____ SPOUSE/OTHER _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

CHILDREN/VISITOR'S NAMES _____

HOME PHONE _____ DRIVERS LIC. # _____ STATE _____ BIRTHDATE _____

E-MAIL ADDRESS _____

EMPLOYER _____ WORK PHONE _____

SPOUSE/OTHER EMPLOYER _____ WORK PHONE _____

At what time (_____) and at what phone number (_____) can we call you to talk to you about your pet?

Who would we ask for? _____ Alternate Emergency Number _____ Name _____

We will gladly prepare a written estimate if you desire (please ask our doctor OR receptionist. This will be important to you since **ALL PROFESSIONAL FEES ARE DUE AT THE TIME THE SERVICES ARE RENDERED.** *In cases of extensive medical or surgical procedures, when full payment may be difficult at discharge, we take Visa, Mastercard, Discover, American Express, CareCredit (ask us for information), or can establish a payment arrangement with hold checks if approved in advance of the treatment.* There will be a \$28.00 service charge for any check returned unpaid.

To prevent the spread of infectious diseases, all hospitalized and boarded patients must be current on all vaccines and free from internal and external parasites. The signature below authorizes this level of preventive care and the appropriate charges will be assessed in the discharge invoice. The person signing below will be responsible for all charges incurred in the care of this pet(s).

Signature of Responsible Agent for Pet(s) _____ Date _____

How/Why did you select us? _____

Are you interested in Behavior Management Assistance? _____

ESSENTIAL PET INFORMATION (PLEASE LIST ALL OF YOUR CURRENT PETS)

CAT	DOG	OTHER	PET'S NAME	BREED	D.O.B.	SEX	NEUTERED OR SPAYED	COLOR	DATE OF LAST VACCINATIONS

If your pet(s) travel (or have traveled) out of the area, where? _____