

Please print this form, fill it out, and bring it with you at the time of your appointment. Thank you.

Date: \_\_\_\_\_

### Client Information

Name (Last Name First): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone Number: (\_\_\_\_) \_\_\_\_\_

How did you learn about our practice: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

(We send patient vaccination reminders via e-mail)

### Pet Information

*If you have multiple pets, please feel welcome to fill out additional 'pet information forms'.*

Pet's Name: \_\_\_\_\_  Canine  Feline  Other: \_\_\_\_\_

Sex:  Male  Male (Neutered)  Female  Female (Spayed)

Pet's Age: \_\_\_\_\_ Pet's Birthdate (If known): \_\_\_\_\_

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Is your pet currently using a flea and tick preventative?  No  Yes

Is your pet taking a monthly heartworm preventative?  No  Yes

### Pet's History (Check all that apply)

*Please provide medical records to our receptionists so they can update your pet's vaccination status.*

Heartworm Test Date Last Performed: \_\_\_\_\_ Results: \_\_\_\_\_

Feline FELV/FIV Test Date Last Performed: \_\_\_\_\_ Results: \_\_\_\_\_

Microchip: *Please provide microchip identification number to our receptionists. Thank you.*

Prior Surgery: (Please explain briefly) \_\_\_\_\_

Prior Illness: (Please explain briefly) \_\_\_\_\_

Other: \_\_\_\_\_

### Authorization

*I hereby authorize the veterinarian to examine, prescribe for, and/or treat the above described pet(s). I assume responsibility for all charges incurred in the care of the animal(s). I also understand that COMPLETE PAYMENT IS REQUIRED WHEN SERVICES ARE RENDERED. We accept Cash, Credit, and Checks; we also accept Care Credit. If you wish to write checks for payment, a copy of your driver's license is required. Please provide this to our receptionists.*

Signature or owner/responsible agent: \_\_\_\_\_

Date: \_\_\_\_\_