

Client Information

Today's date: ____/____/____

Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐

First name: _____ MI: ____ Last name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home phone: (____) _____ Work: (____) _____ Cell: (____) _____

Email: _____

Method of payment

I acknowledge and assume responsibility for all charges incurred in the care of the animals named below. **ALL PROFESSIONAL FEES ARE DUE AT THE TIME SERVICES ARE RENDERED.** There will be a \$50.00 service charge for any check returned unpaid.

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

For your convenience,

We accept Mastercard, Visa, Discover, American Express, cash, or check (with a valid driver's license).

Please check one: Cash ☐ Check ☐ Debit/Credit ☐ Care Credit ☐**Pet information**

	Pet #1	Pet #2	Pet #3	Pet #4	Pet #5
Name					
Species (Dog/Cat)					
DOB/Age					
Sex	M or F	M or F	M or F	M or F	M or F
Spayed/Neutered?	Y or N	Y or N	Y or N	Y or N	Y or N
Breed					
Color					
Medication Allergies					
Previous Vacc. Rxn?	Y or N	Y or N	Y or N	Y or N	Y or N

How did you hear about us?

- ☐ Facebook
- ☐ Angie's List
- ☐ Yelp!
- ☐ Google (I searched for " _____")
- ☐ Personal referral - whom may we thank? _____
- ☐ Other _____

Please answer the following questions as openly, completely, and honestly as possible:

Thinking about previous vet(s) what could have been done better?

Why did you leave your previous veterinary practice?

What was done well, that we should also do?

List any major surgeries your pet has had:

Have all of your pets lived their whole life in Pennsylvania? ☐YES ☐NO

Details: _____

Have any of your pets ever had a reaction to vaccines or medications? ☐YES ☐NO

Details: _____

If we could only help you solve ONE problem with your pet today, what would it be?

Do all your pets receive monthly heartworm prevention? ☐YES ☐NO

Do all your pets receive monthly flea prevention? ☐YES ☐NO

Has your pet ever been muzzled at the vet before? ☐YES ☐NO

List any food or treats you give your pet: _____

Do you consider your pet: ☐Overweight ☐Underweight ☐Ideal body condition

*YES! You may photograph my pets for use in social media (Facebook, email, etc.): ☐Agree ☐Disagree