

NEW CLIENT SHEET

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

Owner's Name: \_\_\_\_\_

Spouse/Partner's Name: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_

Spouse/Partner Phone #: \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_

E-Mail: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

All fees are due when services are rendered. How do you prefer to pay your bill?

CASH    CHECK    VISA    MASTERCARD    DISCOVER    CARE CREDIT

Pet Information:

Name: \_\_\_\_\_ Canine/Feline/Avian/Other (Circle One)

Breed: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Color: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Is your pet neutered? : \_\_\_\_\_

Please mark how you prefer to receive your vaccine reminders (You can mark multiple options)

\_\_\_\_\_ Mail    \_\_\_\_\_ Email    \_\_\_\_\_ Text    \_\_\_\_\_ None (here for second opinion)

We often post pictures on Facebook and Instagram of some of the pets that come here, do we have your permission to post your pet's photo (we use pet's first name)

Yes \_\_\_\_\_ No \_\_\_\_\_