



We are pleased to welcome you to our practice. Please take a few minutes to fill out this form as completely as you can. We look forward to working with you and your pet.

Client Information

(Name) Last _____ First _____ MI _____
Address _____
City _____ State _____ Zip _____
Phone: Home _____ Work _____ Cell _____
Place of Employment _____ Driver License Number _____
Alternate Contact Name _____ Phone _____
E Mail Address _____

I *DO NOT WISH* to have the following sent to me via email: (please check all that apply, leave blank to receive email notifications) ___monthly newsletter (mn) ___lost pet notifications (pn) ___promotional offers (po) We respect your privacy and do not sell or provide your email address to any outside company.

How will you be handling your visit? Cash Check Visa/Mastercard/Discover CareCredit Debit

Patient Information (Pet)

Previous Veterinarian _____ Phone _____
Pet's Name _____ Pet's Name _____ Pet's Name _____
Breed _____ Breed _____ Breed _____
Sex Male Female Sex Male Female Sex Male Female
Spay / Neuter? _____ Spay / Neuter? _____ Spay / Neuter? _____
Color _____ Color _____ Color _____
Age _____ Age _____ Age _____

How Did You Hear About Us?

If you were referred to us by a friend please let us know so we can thank them.

Friend _____ Sign Yellow pages Pet Pages Internet Other _____

I understand and agree that, I am at least 18 years old and I am responsible for the balance on my animal's account for any professional services rendered at the time of service. We will gladly prepare a written estimate of service fees if you desire, please ask. In addition to services I may request from time to time, I specifically authorize you to perform any services reasonably necessary to provide and protect the health and well being of my pet, other pets at the hospital and the staff at the hospital. I authorize San Antonio Animal Hospital to obtain medical records from other veterinarians that have treated my pet(s). I give permission for my pet's image to be used in promotional material. I have read and agree that all the information is true and correct to the best of my knowledge.

Signature

Date