

Signature of owner

Welcome! Thank you for giving us the opportunity to care for your pet. We're happy to answer any questions you may have about your pet's health. Please take a moment to complete this form so we can accurately set up your account. If you need assistance at any point, just let us know. Because our reminders are fully electronic, please include a good email address and cell number.

\*\*\*If you have previous records, please remember to email or text them to us, or bring them the day of your exam so we can prepare ahead of time.

## **Client Information:** Owner First/Last name: Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Home Phone: \_\_\_\_ Cell Phone:\_\_\_\_\_ Work Phone: \_\_\_\_\_ Email address: \_\_\_\_\_ Driver License #: \_\_\_\_\_ May we email you vaccine reminders? \_ Spouse/Co-owner name and phone number: Emergency Contact name and phone number: Pet Information: Name of pet: Date of birth: Breed: Color/markings: Dog/Cat Male/Female \_\_\_\_\_ Spayed/Neutered \_\_\_\_ Reason for \_\_\_\_\_ Who is your pet's today's visit: previous veterinarian? \_\_\_\_\_ Pet Information: Name of pet: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Breed: \_\_\_\_\_ Color/markings: \_\_\_\_\_ Dog/Cat Male/Female Spayed/Neutered Reason for today's visit: Who is your pet's previous veterinarian? How did you hear about Pine Grove Vet Clinic? Referred by a friend: \_\_\_\_\_ Are they a current client here? \_\_\_\_ Other Hospital: \_\_\_\_ Walk-in: \_\_\_\_ Internet (please specify ie Google, Facebook): I hereby authorize the veterinarian to examine, diagnose, and treat the above-mentioned pet(s). I understand that I am responsible for all fees associated with their care and that payment is required at the time services are rendered. I acknowledge that some procedures and treatments may require a deposit. I also agree to speak to all staff members with courtesy and respect. I understand that to help provide the best care and maintain a supportive environment, Pine Grove Veterinary Clinic does not tolerate verbal aggression, intimidation, or disrespect toward staff, and inappropriate behavior may result in discontinuation of services.

Date