



Welcome to the Animal Care Clinic! We appreciate the trust you have placed in us to provide your four-legged family member's Health Care. Please take a few minutes to complete our new client/patient form so that we can best serve your needs.

Date: _____ Social Security or DL # & State: _____

Name: (Last) _____ (First) _____ (MI) _____

Spouse's Full Name: _____

Home Address: _____

City/State/Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

How did you become aware of our clinic? _____

Effective March 1st, 2010, checks will not be accepted on new accounts. Please check method of payment:

☐ **Cash** ☐ **Credit** ☐ **Debit Card** ☐ **Care Credit Card**

Payment is due in full when service is provided. The Animal Care Clinic does not offer billing. For your convenience we do offer Care Credit® for qualified clients, Care Credit® offers an affordable payment plan. To find out more about Credit Care® or to fill out an application please ask our staff. Pet Health Care Insurance is also available. Please ask for a free information packet to find out about this option.

Patient Information

Name: _____

Species: ☐ Dog ☐ Cat ☐ Rabbit ☐ Ferret ☐ Other: _____

Breed: _____ Sex: _____

Spayed/Neutered? ☐ Yes ☐ No

Color: _____ Markings: _____

Age: _____ Date of Birth: _____

Where did you obtain your pet? _____

When did you obtain your pet? _____

Has your pet been vaccinated? _____

When was your pet last vaccinated? _____

Which vaccines were administered?

	Dog	Cat	Ferret
<input type="checkbox"/> Rabies	<input type="checkbox"/> Distemper	<input type="checkbox"/> Rabies	<input type="checkbox"/> Rabies
<input type="checkbox"/> Parvo	<input type="checkbox"/> Corona	<input type="checkbox"/> Distemper	<input type="checkbox"/> Distemper
<input type="checkbox"/> Lyme Dz	<input type="checkbox"/> Giardia	<input type="checkbox"/> Leukemia	
<input type="checkbox"/> Bordetella			

Does your pet have any allergies to medication (s)? _____

Is your pet currently on any medication (s)? please List: _____

Is your pet currently on heartworm, flea or tick preventives? Please List: _____

