

"Exceptional Care, Extraordinary Lives"

## New Client Form

### CLIENT INFORMATION

First name [Click here to enter text.](#) Last name [Click here to enter text.](#)

Spouse/Partner first name [Click here to enter text.](#) Spouse/Partner last name [Click here to enter text.](#)

Address [Click here to enter text.](#)

City [Click here to enter text.](#) State [Click here to enter text.](#) Zip [Click here to enter text.](#)

Home phone [Click here to enter text.](#) Work phone [Click here to enter text.](#) Cell [Click here to enter text.](#)

E-mail address to allow for service reminders [Click here to enter text.](#)

Other Authorized Pet Caretaker [Click here to enter text.](#) Relation [Click here to enter text.](#)

Phone number [Click here to enter text.](#)

### PATIENT INFORMATION

Pet's name: [Click here to enter text.](#) Sex: Male (  ) Female (  ) Neutered (  ) Spayed (  )

Species: Dog (  ) Cat (  ) Other [Click here to enter text.](#) Does your Pet bite? Yes (  ) No (  )

Pet's Date of Birth (Month/Day/Year) [Click here to enter text.](#) or approximate age [Click here to enter text.](#)

Breed [Click here to enter text.](#) Color [Click here to enter text.](#)

Reason for bringing pet in: [Click here to enter text.](#)

Does your pet have any allergies, special medications, or health problems we should know about? Yes (  ) No (  )

If yes, what? [Click here to enter text.](#)

What type of food does your pet eat? [Click here to enter text.](#) Treats? [Click here to enter text.](#)

Name of previous vet hospital? [Click here to enter text.](#) Phone [Click here to enter text.](#)

### How did you become aware of our hospital?

Road Sign (  ), Internet (  ), Shelter (  ), Website, [www.happytailsveterinary.com](http://www.happytailsveterinary.com) (  ) Other

Referred by a friend Whom may we thank? [Click here to enter text.](#)

Referred by veterinarian Whom may we thank? [Click here to enter text.](#)

**We appreciate payment when services are rendered. For your convenience, we accept cash, Master Card, Visa, and Discover, Amex. We also offer Scratch Pay and Care Credit. We No longer accept checks.**

**We love our patients and want to share cute moments of our patients along with educational material on our Facebook page. We will never share your information or pet's pictures to any 3<sup>rd</sup> party or for any monetary gain. Please indicate if we have your permission to post pictures of your pet on our social media page. YES (  ) NO (  )**

I, [Click here to enter text.](#) , verify that all the information provided is accurate.

Electronic Signature [Click here to enter text.](#)

Date [Click here to enter text.](#)