



Welcome!

We're very pleased that you have chosen Companion Pet Care for your pet's care. Please complete the information below so that we may ensure accurate record keeping and better serve you.

Today's Date: _____

New Client Information

Owner's Name: _____	Spouse's Name: _____
Address: _____	Spouse's Work Phone: _____
City/State/Zip: _____	Home Phone: _____
Place of Employment: _____	Work Phone: _____
Email Address: _____	Cell Phone: _____

How Did You First Hear About Us?

Drove By Yellow Pages Website Previous Client Other: _____
 Referred by friend, relative, or organization (Name): _____

Tell Us About Your Pet(s)

	PET #1	PET #2	PET #3
Name: _____	_____	_____	_____
Breed: _____	_____	_____	_____
Color: _____	_____	_____	_____
Date of Birth: _____	_____	_____	_____
Sex: _____	_____	_____	_____
Spayed/Neutered: _____	_____	_____	_____

Your Dog's Vaccination History (please indicate date of last vaccination)

Rabies: _____	_____	_____
Distemper/Parvo/Corona: _____	_____	_____
Bordetella (Kennel Cough): _____	_____	_____
Lyme Disease: _____	_____	_____
Heartworm Test: _____	_____	_____
Heartworm Preventative Used: _____	_____	_____
Fecal (Stool Sample): _____	_____	_____

Your Cat's Vaccination History (please indicate date of last vaccination)

Rabies: _____	_____	_____
Distemper Combination: _____	_____	_____
Chlamydia: _____	_____	_____
Leukemia Vaccine / Test: _____	_____	_____
Fecal (Stool Sample): _____	_____	_____

Is your pet(s) experiencing problems with:

Vomiting Diarrhea Sneezing Coughing Ears Eyes Itching
 Limping Seizures Urinary Heart Behavior Other _____

Any previous serious illness or surgeries? _____

Any allergies to vaccinations or medications? _____

Is your pet(s) on any special diets or medications? _____

Payment Information (Please check type of preferred payment and sign statement below.)

Cash Check Visa MasterCard Discover American Express Care Credit

I understand that all fees must be paid at the time services are rendered. In the event the account is turned over for collection, I agree to pay collection fees.

Signature