Welcome

We know your pet's health is important and we thank you for trusting us to care for them. To help us provide the best care possible, please take a few moments to fill out this form completely. Thank You!

REGISTRATION

Pet Parent: **Primary Phone**:

Address: (Cell, Work, Home - Circle One)

City: **State:** **Zip Code:**

Email:

Other Pet Parent: **Other Pet Parent Phone:**

(Cell, Work, Home - Circle One)

Emergency Contact Name: **Phone:**

How did you learn about our clinic? ☐ Website ☐ Yellow Pages ☐ Facebook ☐ Recommendation ☐ Yelp ☐ Pet Event ☐ GYP ☐ Other:

If recommended, by whom?

Can we use your pet(s) photo on social media sites ☐ Yes ☐ No

PET HEALTH HISTORY

Name of Pet: **Species:** ☐ Other:

Breed: **Color:** **Birthdate:**

Sex: **Neutered/Spayed:** ☐ Yes ☐ No ☐ Unsure (Please Check One)

Previous Veterinary Clinic Name (For Requesting Records):

Please check (✓) any symptoms or problems that you have noticed about your pet:

- ☐ Behavioral Problems
- ☐ Bleeding Gums
- ☐ Breathing Problems
- ☐ Coughing
- ☐ Diarrhea
- ☐ Eye Bulging or Bloodshot
- ☐ Gagging
- ☐ Lack of Appetite
- ☐ Limping
- ☐ Loss of Balance
- ☐ Scooting
- ☐ Scratching
- ☐ Seems Depressed
- ☐ Shaking Head
- ☐ Sneezing
- ☐ Thirst and or Urination Increased
- ☐ Vomiting
- ☐ Weakness
- ☐ Other: _____

Pet's current medications: _____

Describe your pet's diet: _____

AUTHORIZATION

I hereby authorize the veterinarian to examine, prescribe for, and/or treat the above described pet. I assume full responsibility for all charges incurred for the care of this animal. I also understand that these charges will be paid at the time of release and that a deposit may be required for surgical treatment.

Signature of Owner: _____ **Date:** _____

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Heartfelt Veterinary Hospital
Mastering The Art Of Pet Care

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Additional Pet Information

Name of Pet: **Species:** ☐ **Other:**

Breed: **Color:** **Birthdate:**

Sex: **Neutered/Spayed:** ☐ **Yes** ☐ **No** ☐ **Unsure (Please Check One)**

Previous Veterinary Clinic Name (For Requesting Records):

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Describe your pet's diet:

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