



# PetVet Animal Health Center

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## Welcome to PetVet Animal Health Center

*“Caring Hands for the Pets You Love”*

Are you new to PetVet? Yes  No

How did you hear about us? \_\_\_\_\_

### **Client Information:**

Owner's Name (Dr./Mr./Mrs./Ms.) \_\_\_\_\_

Owner's Birthdate \_\_\_\_\_

Address \_\_\_\_\_ Apt/Lot \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

How do you prefer to receive reminders for your pet(s)? Text  Email  Postcard

*You may choose more than one option*

### **Patient Information:**

Do we have permission to share your pet(s) images on our social media accounts? Yes  No

1. Name \_\_\_\_\_ Age/Birthday: \_\_\_\_\_

Species: Cat  Dog  Other  Breed \_\_\_\_\_ Color \_\_\_\_\_

Gender: Male  Female  Spayed/Neutered: Yes  No

On a scale of 0 – 5, how fearful is your pet while at the vet? \_\_\_\_\_

\*0 being calm and relaxed, while 4 -5 we may see elevated anxiety or aggression\*

Does your pet have food allergies? Yes  No  If yes, what kind? \_\_\_\_\_

Has your pet ever had a reaction to vaccines or medications? Yes  No

2. Name \_\_\_\_\_ Age/Birthday: \_\_\_\_\_

Species: Cat  Dog  Other  Breed \_\_\_\_\_ Color \_\_\_\_\_

Gender: Male  Female  Spayed/Neutered: Yes  No

On a scale of 0 – 5, how fearful is your pet while at the vet? \_\_\_\_\_

\*0 being calm and relaxed, while 4 -5 we may see elevated anxiety or aggression\*

Does your pet have food allergies? Yes  No  If yes, what kind? \_\_\_\_\_

Has your pet ever had a reaction to vaccines or medications? Yes  No



*\*Please make arrangements with the front staff if you authorize another person(s) to pick up your pet(s)\**

**All Fees Are Due at the Time of Service:**

For your convenience, we accept cash, checks, Visa, MasterCard, Discover, and Care Credit. We can provide a written estimate any time at your request. There will be a \$30.00 service charge for any check returned unpaid. Statements are mailed at the 1st of each month. All accounts carrying an unpaid balance will be charged a monthly interest rate of 1.5%.

I acknowledge that no guarantees have been made as to the effect of examinations or treatments. I, the undersigned, accept the fee charged as a legal and lawful debt and agree to pay said fee, including any/collection agency fees (33.33%), attorney fees, and/or court costs, if such are necessary. I waive now and forever my right of exemption under the laws of the constitution of the State of Alabama and any other state.

You agree, in order for us to service your account or to collect monies you may owe, PetVet Animal Health Center and/or agents may contact you by telephone at any telephone number associated with your account, including wireless telephone numbers, which could result in charges to you. We may also contact you by sending text messages or emails, using any email address you provide to us. Methods of contact may include using pre-recorded/artificial voice messages and/or use of automatic dialing device, as applicable.

I/We have read this disclosure and agree that PetVet Animal Health Center, its employees and/or agents may contact me/us as described above.

X

\_\_\_\_\_

Responsible Party

\_\_\_\_\_

Date

