

**5034 North Broadway, Suite 255, Knoxville, TN 37918, (865) 357-1838**

**Welcome to Just For Pets Animal Clinic! Thank you for allowing us to care for your pet.**

Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Spouse/Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_

Primary Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secondary Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Preferred Reminder Method (text, Email, Phone)\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Emergency Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who can we thank for referring you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous veterinary care (name of hospital) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we call to get records? YES NO (circle one)

**REASON FOR YOUR PET’S VISIT TODAY?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please list your pets:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Pet’s Name** | **Cat** | **Dog** | **Other** | **DOB/Age** | **Sex** | **Spayed/**  **Neutered** | **Breed** | **Color** |
|  |  |  |  |  |  | Y or N |  |  |
|  |  |  |  |  |  | Y of N |  |  |
|  |  |  |  |  |  | Y of N |  |  |
|  |  |  |  |  |  | Y of N |  |  |
|  |  |  |  |  |  | Y of N |  |  |

Preferred method of payment (circle one): Cash, Debit Card, Visa, Master Card, Discover, American Express, Care Credit Sorry, We no longer accept checks. **ALL PROFESSIONAL FEES ARE DUE AT THE TIME SERVICES ARE RENDERED**. We will gladly provide an estimate for any services recommended.

Signature of Responsible Agent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Office use only: Client Number*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Would you like to see your pet’s photograph on our website or Facebook page? Here at Just For Pets we love to see our clients go home happy, and what better way to commemorate that experience than a photograph?
* Circle yes  , no