

Circle L Animal Hospital

845 South Highway 89
Chino Valley, AZ 86323
928-636-4421

NEW CLIENT REGISTRATION / QUESTIONNAIRE

Owner:	_____	Spouse:	_____		
Social Security #:	_____	Social Security #:	_____		
Address:	_____	City:	_____	State:	_____
Mailing Address:	_____	City:	_____	State:	_____
Home Phone:	_____	Email Address:	_____		
Cell Phone:	_____	Cell Phone:	_____		
Work Phone:	_____	Work Phone:	_____		
Employer:	_____	Employer:	_____		
Occupation:	_____	Occupation:	_____		

PET INFORMATION:

Name of Pet:	_____	Species:	<input type="checkbox"/> Dog	<input type="checkbox"/> Cat	<input type="checkbox"/> Other
Breed:	_____	Sex:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Age:	Years: _____	Mos: _____	Spayed/Neutered:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Color:	_____	Is your pet on preventative heartworm medication?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

DATE OF LAST VACCINATIONS:

DISTEMPER	PARVO	LYME	RABIES	BORDETELLA	FVRCP	FELV

Areas your pet has lived besides the Chino Valley/Prescott area? _____

Problems we should be aware of: chronic illness, allergies, medications, etc?

We at Circle L Animal Hospital strive to provide your pet(s) with the utmost in quality care—at reasonable rates. Our regular office hours are by appointment. Monday thru Friday 8:00 AM—5:30 PM. We are closed between 12:00 PM and 1:30 PM on Tuesdays for office meetings. Saturday hours are from 9:00 AM—1:00 PM. . It is also understood that the hospital is only staffed during normal business hours. A Doctor is on-call 24 hours a day. Should you need a doctor's service after our regular office hours, please call 771-7564 and the doctor on call will be paged. If the Doctor is involved in another emergency, there may be a slight delay in getting back to you, but the Doctor will return your call.

Payment is expected at the time of services. Cash, Check, Visa , Care Credit, pet insurance and Mastercard are accepted. We provide quotes for routine services on requests. In estimating costs for emergency services, we will keep you informed of any changes. In the event that an account is not paid, in full, when due, it will bear interest at the rate of 24% per anum. Client further agrees to pay all costs of collection and reasonable attorney fees, if this matter is referred to an attorney for collection.

Signature

Date

Drivers License #

Expiration Date

Date of Birth