

# OCOTILLO ANIMAL CLINIC & PET RESORT

## Client Registration Form

### Owner Information:

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Spouse: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone#: \_\_\_\_\_ Secondary#: \_\_\_\_\_ Other#: \_\_\_\_\_

Email: \_\_\_\_\_ Owner DOB: \_\_\_\_\_

\* For Dispensing Controlled Substances \*

### Please tell us how you heard about us:

Sign/Drove By  Phone Book  Coupon  Internet  Facebook  Other: \_\_\_\_\_

Friend: \_\_\_\_\_

### Pet Information:

	Pet #1		Pet #2		Pet #3	
Name						
Species	Canine	Feline	Canine	Feline	Canine	Feline
DOB	___/___/___		___/___/___		___/___/___	
Breed						
Color(s)						
Sex	Male Neutered	Female Spayed	Male Neutered	Female Spayed	Male Neutered	Female Spayed
Microchip #	Yes	No	Yes	No	Yes	No
Last Vaccines	___/___/___		___/___/___		___/___/___	
Medical Conditions						

### May we contact your previous veterinarian to obtain medical records?

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

### We Accept:

**\* CASH \* DEBIT \* VISA \* MASTERCARD \* DISCOVER \* AMERICAN EXPRESS \* CARE CREDIT \***

**WE DO NOT ACCEPT CHECKS OR OFFER PAYMENT PLANS**

I authorize Ocotillo Animal Clinic to perform procedures necessary and advisable for my pet(s) health and wellbeing. **I accept responsibility for all fees incurred in the care of my pet at the time services are rendered.** In the event that it becomes necessary to refer my account to an outside collections agency, I am aware that all finance charges, collection costs, attorney fees, and other collection costs associated with that activity will be the responsibility of the pet owner.

\_\_\_\_\_  
**Signature of Pet Owner or Responsible Party**

\_\_\_\_\_  
**Date**

*We love sharing pictures and videos of our patients with animal lovers everywhere! This includes displaying them on our website, Facebook, and any other promotional/educational material. If you do not wish for photos and/or videos of you and/or your pet to be displayed, please initial to decline.* Decline: \_\_\_\_\_