

**Quail Ridge Animal Hospital**

397 Mica Dr. Suite 18 Carson City, NV 89705

Ph: (775) 267-4888 / Fax: (775) 267-3337

www.quailridgepets.com

**New Client Information**

We are pleased to welcome you to our practice. Please take a few minutes to fill out this form as completely as you can. If you have questions, we will be glad to help you. We look forward to working with you in maintaining your pet's health.

Name \_\_\_\_\_ Date \_\_\_\_\_

Last

First

Initial

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_

Spouse or Co-Owner \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Email \_\_\_\_\_

How did you learn about our practice? \_\_\_\_\_

Notify in case of emergency \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Email \_\_\_\_\_

**Pet's Information**

Pet's Name \_\_\_\_\_  Dog  Cat  Other \_\_\_\_\_ Age/Birthday \_\_\_\_\_

Sex  M  F Breed \_\_\_\_\_ Color \_\_\_\_\_ Neutered/Spay  Yes  No At what Age? \_\_\_\_\_

Where did you obtain this pet?  Friend  Breeder  Pet Shop  Humane Society  Other \_\_\_\_\_

At what age was the pet obtained? \_\_\_\_\_ months/years

For what purpose was this pet obtained?  Companionship  Protection  Breeding  Show  Other

Diet (kind of pet food) \_\_\_\_\_

Reason for pet's visit today:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other information in regards to your pet's health you would like us to know (ie: Allergies, Chronic illness, etc):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We will gladly prepare a written estimate of service fees if you desire (please ask our doctor or receptionist). All professional fees are due at the time of services rendered. There will be a service charge of \$30 for any check returned unpaid. All major credit cards including care credit are accepted.

Signature of client responsible for pet(s) \_\_\_\_\_ Date \_\_\_\_\_