

New Client/Pet Form

Pet Owner's Name _____ Spouse _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Employer _____ Social Security # _____

Referred by _____ (We would like to thank them)

Email address _____ (To email reminders, records, history, etc)

PET INFORMATION:

Pet's Name _____ Birth Date _____

Species _____ Breed _____ Color _____

Pet's Weight _____

Female spayed? Yes No

Male neutered? Yes No

MICROSHIP IDENTIFICATION:

Does your pet have a microchip? Yes No

REASON FOR VISIT TODAY

Do you know what vaccinations your pet has had? If so, indicate the month/year they were given:

Canine Distemper/Parvo _____ Corona virus _____ Lyme _____

Feline Distemper _____ Bordatella _____ Rabies _____

Feline Leukemia _____ Others _____

Former Veterinarian Name _____ Phone _____

Please indicate if you are 62 years of age or older and we will apply a 10% discount.

PLEASE SEE REVERSE SIDE FOR CLINIC POLICIES

PAYMENT POLICY FOR EUDORA ANIMAL HOSPITAL

We do not extend credit though our accounts receivable-unless special arrangements have been made with the Doctors before or at time of visit or procedure.

If accounts are not paid within 60 days, there will be a late fee of \$25.00 added to your bill.

We do offer an alternative payment process for major procedures though a CARE CREDIT payment plan.

YOU MUST FIRST BE APPROVED FOR THIS PLAN.

On line applicants at WWW.CARECREDIT.COM

Automated phone application call 1-800-365-8295

In-clinic application-Ask our office for an application.

With Care Credit you can spread the cost of care over several months.

NO interest if paid within 3, 6, or 12 months.*

Minimum monthly payments required.

*Applies to purchases of \$300, \$700, or \$1000 or more

Under the promotion, no finance charges will be assessed on the promotional purchase as long as: (1) you pay the promo purchase amount in full within 3, 6, or 12 months (the “promo period”), and (2) you pay, when due, the minimum monthly payment on your account, which includes a required minimum monthly payment on the promo purchase. If you fail to satisfy either of the above conditions, all special promo terms will be terminated and finance charges will be assessed on the promo purchase amount from the date of the purchase.

Our helpful staff will answer your questions if you need to apply for Care Credit.

Welcome to Eudora Animal Hospital. Questions and comments are always welcome. Our goal is to provide quality health care for your pets.

Signature_____ Date_____