



Welcome to Orange Veterinary Hospital
New Client Form

Please tell us how you found us:

Internet Search: West Haven Animal Shelter: Safari Stan's: Statewide Pets: Google: Yelp:

Other: _____ Personal Reference: Name? _____

Pet Owner's Information:

Day Phone Number: _____ Cell Phone Number: _____

Work Phone Number: _____ E-mail: _____

Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Additional Contact Information: Spouse Partner: Family Member: _____

Last Name: _____ First Name: _____

Day Phone Number: _____ Cell Phone Number: _____

Pet's Information:

Name: _____ Breed: _____ Color: _____

D.O.B.: ____/____/____ Gender: Male Neutered Male Female Spayed Female

We accept cash, checks, American Express, MasterCard, Visa, and Discover. For your convenience, we have partnered with Care Credit for all billing services. Please note payment is required at the time of services rendered. To prevent the spread of infectious diseases, all boarders, groomers, and hospitalized pets MUST be current on all core vaccines. A signature below authorizes this level of preventative care and your responsibility for payment of appropriate charges.

Signature: _____ **Date:** _____