

North Cache Veterinary
North Cache Veterinary Service

Welcome to our Office

Our staff and doctors want to welcome you to our family of clients and their pets. The following information will help us ensure that we provide comprehensive care for your pets based on their individual needs and your expectations and lifestyle.

Who will be responsible for authorizing procedures and/or paying for services?

Signature

All fees are due at the time of service.

Please indicate your choice of payment.

cash check (driver's license required)
 credit card CareCredit (Ask me)

Owner(s) _____

Address _____

City _____ State _____ Zip _____

Home phone (_____) _____

Cell phone (_____) _____

Work phone (_____) _____

Email address: _____

Place of employment: _____

Address: _____

City _____ State _____ Zip _____

Spouse employment: _____

Address: _____

City _____ State _____ Zip _____

Phone [_____] _____

Pet's name _____

Dog Cat Other

Breed _____

Color _____ Date of Birth _____

Sex _____ Spayed/Neutered Yes No

Have you medicated your pet recently (including over-the-counter drugs) Yes No

If yes, list medications: _____

Does your pet have a microchip? Yes _____

No

Has your pet been tested for heartworms? Yes No

If yes, when? _____

Any prior illness or injury we should know about?

Yes No If yes, when? _____

Is your pet on a preventative program for parasites?

Yes No If yes, what? _____

Do you have your pet groomed? Yes No

Is your pet boarded at times? Yes No

Does your pet ever travel with you? Yes No

If yes, is the travel out of state? Yes No

May we inform you of longevity issues such as regular dental care and special diets? Yes No

Do you use your pet for hunting or sporting? Yes No

Other pets (dog, cat, or other) in the household? Yes No

Please list: _____

Do you consider your pet

a member of the family an outside animal

How did you hear about North Cache Veterinary

Service?

Friend or relative/ Name?

Yellow pages Clinic Sign

Other

Thank you for choosing us for your pet care needs.

