

## **New Client/Patient Information**

Tell us about you!			
Name	ID no. (clinic use)		
Spouse/Co-owner			
Address			
City	State Zip Code		
Home phone	Business phone		
Cell phone	Other phone		
Email Address			
How did you hear about us?	newsletters by email? Yes □ No □		
☐ Outdoor sign/driving by	☐ Door hanger/flyer		
☐ Yellow pages ad	☐ Internet/web site:		
☐ Business white pages	☐ Clinic brochure – where?		
☐ Individual referral (see below)	☐ Veterinary Practice (see below)		
	d you		

Please complete the patient information on the other side.

## Tell us about your cat(s)!

Cat's Name		I	D no. (clinic use)	
Breed		Color & Markings		
Birthday		Male / Female	Spayed/neutered?	Yes □ No □
Indoor Only	Outdoor Only	Indoor/Outdoor	: % time outdoors	
Diet	M	edications	On H	eartgard?
Date last vaccin	nated		Microchip ID#	
Brief history of	any previous illne	ss/trauma/surgery		
Anything else v	we need to know al	oout your cat?		
			D no. (clinic use)	
Birthday		Male / Female	Spayed/neutered?	Yes □ No □
Indoor Only	Outdoor Only	Indoor/Outdoor	: % time outdoors	/
Diet	M	edications	On H	eartgard?
Date last vaccin	nated		Microchip ID#	
What is the rea	son for your visit to	oday?		
Do you have ot	her pets? Yes □	No □		
If so, how man	v and what species	?		

## **Welcome to The Cat Doctor!**

We are glad you are here and appreciate the opportunity to serve you and your feline friend(s).

At The Cat Doctor we focus on wellness and preventive medicine for the feline members of your family, and work with you to make the best possible decisions for your pets.

Our goal is to be the first place you think of for all your cat's needs. Let us know how we can best serve you.

## **Policies**

For their safety, all cats should be in a carrier or on a leash when they visit the clinic.

Our clinic office hours are Monday – Friday 7:30am to 6pm. There is no staff here after business hours; any emergencies should be taken to the nearest emergency clinic for immediate care.

Payment is required at the time of service. We accept cash, personal checks with driver's license ID, Visa, MasterCard, American Express and Discover.

Let us know if you would like more information about veterinary pet insurance or the CareCredit payment plan which may afford you more choices when treating your pet.

I have read and understood the above policies at I have any questions regarding them.	nd will feel free to ask the veterinarian or staff if
Signature	Date