



Owner's Name(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Cell: _____ Home: _____ Work: _____ (please include area code)

Email Address(es): _____

Would you like to receive emails for your pet's reminders? **Yes** **No** (circle one)

Others who we can release your pet and/or their info to: _____

Pet's Name ---->	1.	2.	3.	4.
Female/Male				
Age or D.O.B				
Species				
Breed				
Color/Markings				
Spayed/Neutered				
Microchipped				

Previous Vet _____ City and State _____ Phone _____

You and your pet are the most important visitor in our hospital. What is most important to you when choosing a veterinary hospital?

Why did you leave your previous vet?

I understand that pictures of my pet may be taken for his/her medical record. **I do/ do not** (circle one) give permission for the photos to be used in promotional material for the hospital.

I understand that payments are due at the time of service and that East Side Animal Hospital does not extend credit.

Signed _____ Date _____

For Official Use Only Initials
 NCIF Entered _____

How did you hear about us?

Friend - Please provide us with your friend's name, so that we can thank them for their referral.

Friend - not client

Drive By - I saw your sign

Direct Mailer

My apartment complex. Name: _____

Rescue Group: _____

Animal Shelter: _____

Yellow Pages

Referring Veterinarian. Please write the name of hospital: _____

Event _____

Other: Please specify _____

Online

If you found us online, please choose one of the following:

Google Search

Yelp.com

Google Ads

YP.com

Google + page and reviews

Our Website

Facebook

YouTube

American Animal Hospital Association
(AAHA)
website

Other: Please specify _____

For Office Use Only

Initials

NCIF Entered

In the course of advertising, public relations or other similar conduct for business purposes, East Side Animal Hospital may utilize media resources.

I grant to East Side Animal Hospital, its representatives and employees the right to take photographs of me and/or my pet, and to copyright, use and publish the same in print and/or electronically without compensation.

I also agree that East Side Animal Hospital, may use such photographs of me and/or my pet with or without my name and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, and Web content. This would be true of any written statement I have made regarding my pet or my experiences at East Side Animal Hospital.

- East Side Animal Hospital may take photos of me and/or my pet.
- East Side Animal Hospital may NOT take photos of me and/or my pet.

Print Name

Signature

Date

Pet(s) Name