

Welcome to Stetson Hills Animal Hospital. Our staff is dedicated to providing optimal patient care and will do its utmost to make your pet's stay pleasant and beneficial. Please feel free to ask any questions concerning the treatment of your pet or other policies of the clinic. Our facility is not staffed 24 hours a day and therefore is unable to provide supervised, overnight care. To help us serve you better, please provide us with the following information.

Date _____

Name _____ Spouse's Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

E- mail address _____ Drivers License # _____ (for check cashing purposes)

Preferred way to be contacted for reminders (circle one) mail e-mail

How did you choose our practice? Yellow Pages Location Other (please specify) _____
 Personal Recommendation (whom may we thank?) _____

Patient Information	Pet #1		Pet #2		Pet #3	
Name						
Breed						
Date of Birth						
Color						
Sex: (circle)	Female Spayed	Male Neutered	Female Spayed	Male Neutered	Female Spayed	Male Neutered
Last Heartworm Prevention						
Previous Veterinarian Information	Name					
	Hospital					
	Phone					

Our pet is: Member of Family Child's Pet Backyard Pet

Any previous illnesses or surgeries? _____

Any allergies to vaccinations or medications? _____

Is your pet on any special diets or medications? _____

Payment is due when services are rendered. Finance charges will be assessed to overdue balances.

Signature of Owner or Agent

Stetson Hills Animal Hospital
3780 W. Happy Valley Rd. Suite 126
Glendale AZ 85310
(623)889-7090

