



# CLEAR LAKE ANIMAL HOSPITAL

2725 N. Australian Ave, West Palm Beach, FL 33407  
(561) 655-5929 | Fax: (561) 655-7229  
[www.vetinpalmbeach.com](http://www.vetinpalmbeach.com)

Name	Date	Client #
Cell #	Home #	Work #
Address	City	State Zip
Email		
Spouse Name	Email	
Cell #	Home #	Work #
Emergency Contact	Phone #	Relationship to Owner
Who Referred You? Name:	Internet	Facebook Drive By Rescue Group Shelter

### Pet Information

Pet Name	Date of Birth	Microchip #
Dog Cat	Sex: Male Neutered Female Spayed	
Breed:	Color	
List any Anxiety or Aggression Issues we should know about:		
List of Medical Conditions:		
List all Current Medications:		
List all Allergies:		
Date of Last Professional Dental Cleaning:	Any Extractions?	
Do you perform Home Dental Care? Yes No	What method do you use?	
Current Diet & Feeding Instructions:		
Is your pet on monthly Prevention? Yes No	If yes, what is the Brand name?	

### INITIAL BELOW

**NEW CLIENTS ONLY:** Initial examination fee of \$75 will be collected at the time your appointment is scheduled. This fee will reserve your appointment time, be used to cover your pet's examination, and is non-refundable if you miss or cancel your appointment.

**PATIENT RECORDS:** I grant permission to have my pet(s) patient records sent to another hospital, boarding, grooming or daycare facility if requested.

**PATIENT PICKUPS/LATE FEES:** Patient pickups are by 4:30 pm. A late fee of \$25 will be applied after 5:00 pm.

**PHOTO RELEASE:** I grant Clear Lake Animal Hospital, its representatives, employees, assigns, and transferees the right to take photographs of my pet(s). I further authorize them to copyright, use, and publish these photographs in print and/or electronically. I agree they may use such photographs of my pet(s) for any lawful purpose, including educational, publicity, illustration, social media, advertising, and web content.

**PAYMENT FOR SERVICES RENDERED:** Payment is collected at the time of appointment, services or purchase of goods. We accept Visa, MasterCard, American Express, Discover, Cash and CareCredit.

***I have read and understand Clear Lake Animal Hospital's Policies regarding Patient Records, Patient Pickup Times, Late Fees, Photo Release and Payment for Services rendered.***

Print Name

Signature

Date