

SANTA BARBARA



CLIENT INFORMATION SHEET

NAME: _____

ADDRESS: _____

TELEPHONE: (HOME) _____ (WORK) _____ (CELL) _____

E-MAIL: _____ CAN WE E-MAIL YOU WITH INFORMATION ON
SPECIAL EVENTS OR ANNOUNCEMENTS THAT WE MAY HAVE FROM TIME TO TIME? YES / NO

WOULD YOU LIKE US TO E-MAIL YOU YOUR INVOICES AS A .PDF FILE? YES / NO

NAME OF PET: _____ BREED TYPE: _____
(use attached sheet for additional pets)

SEX OF PET: _____ AGE OF PET: _____ SPAY/NEUTERED? YES / NO

COLOR/DISTINCTIVE CHARACTERISTICS: _____

HEALTH CONCERNS: _____

VETERINARIAN: _____ VET ADDRESS: _____

VET PHONE: _____ RABIES ID NUMBER: _____

ID TAG? YES / NO CITY LICENSE? YES / NO CITY LICENSE NUMBER: _____

LOCAL EMERGENCY CONTACT (if you are out of town): _____

TELEPHONE OF BLDG. SERVICE: _____
(in case of emergencies such as plumbing, etc)

OTHER PERTINENT INFORMATION: (i.e. feeding instructions, favorite toys, ticklish spots, favorite ball of yarn)

In case of severe weather conditions or other situations that would prevent us from visiting your pet, please provide the phone number of a neighbor or friend, with access to your home, who will be able to care for your pet in such an emergency.

How did you hear about our services? _____

