



Welcome to

Mile Creek Animal Hospital

Client Information

Your Name _____ Spouse's Name _____
Address _____ City _____ State _____
Zip _____
Preferred Phone () _____ 2nd Phone () _____
Email Address _____
Employer _____
Spouse's Phone () _____ Alternate Contact (in case of emergency) _____

Whom may we thank for referring you or How did you find us?

I give my Consent for media display of my pets (Digital Screen/Facebook/Website) _____ (Please Initial).

Pet Information - please list all pets in household

Pet #1: Pet's Name _____ Dog Cat Other _____
Birthdate _____ Sex: Male Female Spayed Neutered
Color _____ Breed _____

Any other information we should know about this pet? (i.e. ongoing medical issues, allergies, temperament problems) _____

Pet #2: Pet's Name _____ Dog Cat Other _____
Birthdate _____ Sex: Male Female Spayed Neutered
Color _____ Breed _____

Any other information we should know about this pet? (i.e. ongoing medical issues, allergies, temperament problems) _____

Pet #3: Pet's Name _____ Dog Cat Other _____
Birthdate _____ Sex: Male Female Spayed Neutered
Color _____ Breed _____

Any other information we should know about this pet? (i.e. ongoing medical issues, allergies, temperament problems) _____

Please list any additional pets on the other side

HOSPITAL POLICIES

We routinely prepare a written estimate. All professional fees are due at the time services are rendered. In cases of extensive medical or surgical procedures where full payment may be difficult at discharge we accept Visa or MasterCard. There will be a service charge of \$35.00 and loss of check writing privileges for any check returned unpaid. There is a \$5.00 processing fee for credit card transactions less than \$15.00.

I assume responsibility for all charges incurred in the care of this animal. I also understand that these charges must be paid at the time of release and that a deposit may be required for treatment.

I am aware that the staffing hours for Mile Creek Animal Hospital are as follows: Monday & Tuesday 8am-6pm, Wednesday, Thursday, Friday 8am-5pm, and Saturday 8am-12pm. We are closed Sundays, the 5th Saturday of the month, and major holidays. Fee based Emergency care will be offered at Dr. Winner's discretion or we refer our patients to West Central Ohio Veterinary Emergency Service in Lima and Dayton Emergency Veterinary Clinic.

SIGNATURE OF CLIENT RESPONSIBLE FOR PET(S) _____