

Janssen Clinic for Animals

The Best Care for Your Best Friends

FIRST NAME: _____ Last Name: _____ Partner Name: _____
ADDRESS: _____ CITY: _____ ZIP: _____
Best Phone #: _____ Phone 2 #: _____ email: _____
Previous vet: _____ Clinic Phone: _____ Clinic email: _____

How did you hear about our clinic? Personal recommendation - Who may we thank?

Hospital Sign Facebook Google JCA website: _____ Other: _____

Reminder Preference? Text Email Other Other reminder: _____

	PATIENT - M/N F/S	PATIENT - M/N F/S	PATIENT - M/N F/S
NAME	_____	_____	_____
DOB	_____	_____	_____
SPECIES/BREED	_____	_____	_____
COLOR	_____	_____	_____

EMERGENCY CONTACT INFORMATION

Place of Employment _____ Spouse's Place of Employment: _____
Spouse Work phone _____ ext: _____
Children's Names/Ages: _____

We have your pet's best interest at heart and provide the highest quality health care. It is Dr. Janssen's philosophy to recommend the same things for his patients that he would do for his own pet. ***A Word About Fees:*** A physical examination and consultation is the first step in providing care for your pet. This is history taking, examination of the pet, and answering questions related to the problem or exam findings. Information is gathered by looking, listening, smelling, and feeling. Sometimes further information is needed, in which case we may suggest lab tests or other procedures. ***All subsequent lab tests, professional procedures, medications and vaccinations have a fee attached in addition to that charged for the physical exam and consultation.*** You are entitled to know what that fee is. However, some of our clients find it time consuming and cumbersome for us to continually quote prices prior to doing anything. Therefore, we would like to know your preference so that we may serve you better please choose one:

Please quote me a price for everything.

Only quote if expected to be over: \$ _____

Do not quote unless I request it.

Signed: _____ Date: _____

Payment is required at time services are rendered

How do you prefer to pay?

Cash Visa Mastercard Discover American Experss: Scratchpay:

Checks Please note that there is a \$20 service charge on all checks returned NSF

Initials of staff who filled out with client _____ Initials of staff who entered on computer _____