



Owner Information (please print)

Last Name, First:
Street Address:
City, State: Zip
Phone Number:

*Owner's driver's license #

*Owner's SS#

*PLEASE NOTE: cash only if no ID is provided. Thank you!

Pet Information:

Pet #1 Name:

Breed: Color:

Canine/Feline Male/Female

Spay/Neuter Birthdate:

Vaccination History:

Previous Veterinarian/Hospital (name/address/phone):

Owner's DOB: (required for Rx)

Secondary Contact Information

Last Name, First:

Phone:

Relationship to Primary:

Owner Driver's license#:

Referred by:

Email address:

Payment is required for all services at the time they are rendered unless prior arrangements have been made with hospital management. In the event that a refund is due and the original payment is a credit card, the refund will be posted against the original credit card. All returned checks are subject to a \$25.00 service fee. A 90-day old account balance is subject for collection efforts and a \$25.00 collection fee will be assessed. Your signature below signifies your understanding and willingness to comply with the hospital's payment terms. In some cases, a deposit may be required before proceeding.

Veterinary Consent: I authorize Erickson Veterinary Hospital to perform the treatment/procedure(s) described in my pet's chart. I will be informed of the reasons for the treatment/procedure(s), along with the expected benefits and risks involved. I understand that unforeseen conditions may require an extension of a planned procedure and/or surgery. I hereby authorize the performance of such procedures or surgeries as are necessary and advisable in the professional judgment of EVH veterinarians or a relief veterinarian. I understand that I assume all risks and am responsible for all costs involved. I also authorize EVH to use pictures of my pet(s) for promotional purposes. Consent will apply to all future pets added to this account unless and until I provide a written revocation of that consent.

By signing this agreement, you acknowledge the importance of maintaining a mutually respectful and professional environment. We reserve the right to discontinue services if any form of mistreatment, disrespect, or inappropriate behavior towards our team occurs.

Signature of Owner

Date