



WELCOME TO LAKE AREA ANIMAL HOSPITAL

FIRST NAME: _____ MIDDLE INITIAL: _____ LAST NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTY: _____

HOME PHONE#: (____) _____ - _____ CELL PHONE#: (____) _____ - _____

WORK PHONE#: (____) _____ - _____ EXT: _____

DRIVER'S LICENSE #: _____ EXP. DATE: ____/____/____ STATE: _____

E-MAIL ADDRESS: _____

PET'S NAME: _____ DOG CAT HORSE OTHER: _____

DATE OF BIRTH/AGE: ____/____/____ SEX: _____ SPAYED NEUTERED

BREED OR DESCRIPTION: _____ COLOR: _____

ANY PREVIOUS MAJOR ILLNESS, KNOWN ALLERGIES, OR MEDICATION REACTIONS: _____

PREVIOUS VETERINARIAN: _____

IS YOUR PET A SERVICE ANIMAL? YES NO

I APPROVE THE USE OF NON CHILD PROOF CONTAINERS. INITIAL HERE _____

HOW DID YOU HEAR ABOUT LAKE AREA ANIMAL HOSPITAL?

- CLIENT/FRIEND REFERRAL: _____
- OTHER: _____
- PHONE BOOK: _____
- INTERNET/WEBSITE
- SAW SIGN/ DROVE BY

WE'RE HAPPY TO PROVIDE PET PORTAL FREE OF CHARGE TO ALL CLIENTS WHO HAVE AN ACTIVE EMAIL ADDRESS. PET PORTAL IS A SECURE, PRIVATE PET HEALTH WEBSITE THAT GIVES YOU A DIRECT ACCESS TO MANAGE YOUR PET(S) HEALTH 24/7.

NOW AVAILABLE TEXT MESSAGING FOR APPOINTMENT REMINDERS.

TEXT MESSAGING TERMS AND CONDITIONS

1. TEXT MESSAGES SHOULD NOT BE RELIED UPON AS THE SOLE REMINDER. WE WILL CALL YOU THE NIGHT BEFORE YOUR APPOINTMENT.
2. MESSAGE AND DATA RATES MAY APPLY.
3. WE ARE NOT RESPONSIBLE IF YOU DO NOT RECEIVE TEXT MESSAGES DUE TO ANY TECHNICAL OR SERVER DIFFICULTIES, PHONE CARRIER OUTAGES, OR DISCONTINUED SERVICE.
4. PLEASE BE ADVISED THAT ANYONE WHO HAS ACCESS TO YOUR PHONE WILL BE ABLE TO SEE YOUR REMINDER MESSAGE.
5. TEXT MESSAGES ARE BEING SENT BY PET PORTAL AND LAKE AREA ANIMAL HOSPITAL.

I HAVE READ AND AGREE TO THE TEXT MESSAGING TERMS AND CONDITIONS. INITIAL HERE _____