

# Crossroads Animal Hospital, LTD.

## New Client-Patient Information

Client Name: \_\_\_\_\_ Spouse/Partner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Work #: \_\_\_\_\_ Email: \_\_\_\_\_

Spouse/  
Partner's Cell #: \_\_\_\_\_ Spouse/  
Partner's Work #: \_\_\_\_\_

Pet Insurance Provider \_\_\_\_\_

### Your Pet's Information:

Pet's Name \_\_\_\_\_ Dog \_\_\_\_\_ Cat \_\_\_\_\_ Other \_\_\_\_\_

Breed: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Spayed/Neutered Y N

Date of Birth (if known): Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Color: \_\_\_\_\_

### Vaccination History:

Dogs

Vaccine	Date Vaccinated
DHPP (Distemper, Hepatitis, Parvo, Parainfluenza)	_____
RABIES	_____
LEPTO	_____
LYMES	_____
BORDATELLA (Kennel Cough)	_____
OTHER (Ferret vax, etc.)	_____

Cats

Vaccine	Date Vaccinated
RCP (Rhinotracheitis, Calicivirus, Panleukopenia)	_____
RABIES	_____
LEUKEMIA	_____
OTHER	_____

Fe Leuk Test? Y N Result \_\_\_\_\_ Date \_\_\_\_\_  
FIV Test? Y N Result \_\_\_\_\_ Date \_\_\_\_\_

How did you hear about us?

\_\_\_ I am a current/past client \_\_\_ Humane Society \_\_\_ Drove by and saw sign \_\_\_ Petco

\_\_\_ Referred by another Veterinarian \_\_\_ Referred by a CRAH client \_\_\_ Referred by a CRAH employee  
Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

I saw your ad in a phone book...

\_\_\_ Dex Yellow-Mpls.  
\_\_\_ Dex Yellow-St. Paul  
\_\_\_ Dex Yellow-S. of the River  
\_\_\_ Frontier Pages  
\_\_\_ South Suburban  
\_\_\_ Idearc-Burnsville  
\_\_\_ Idearc-Eagan  
\_\_\_ Other \_\_\_\_\_

I found you on the internet...

\_\_\_ Google.com  
\_\_\_ Yahoo.com  
\_\_\_ Ask.com  
\_\_\_ bing.com  
\_\_\_ Dex Online  
\_\_\_ yellowpages.com  
\_\_\_ Angie's List  
\_\_\_ facebook.com  
\_\_\_ crossroadsanimalhospital.com  
\_\_\_ Other \_\_\_\_\_

\*Payment is due at the time of service\*

\_\_\_\_\_  
Signature of owner or agent