



New Client Information Form

Welcome to Hickory Veterinary Hospital, LLC. Our staff is dedicated to the optimum patient care and will do its utmost to make your pet's stay pleasant and beneficial. Please feel free to ask any questions concerning the treatment of your pet or other policies of the clinic. To help us serve you better, please provide us with the following information.

Name _____ Spouse/Other Name _____

Address _____ City _____ State _____ Zip _____

Cell Phone _____ Home Phone _____ Work Phone _____

Spouse/Other Cell Phone _____ Spouse/Other Work Phone _____

Email Address _____

Preferred method of contact: Cell Home Work Spouse/Other Cell

How did you choose our practice? Location Internet Other _____

Personal Recommendation (whom may we thank?) _____

	Pet 1	Pet 2	Pet 3
Pet(s) Name			
Breed(s)			

We cannot give diagnoses by phone or through email. Please call for an appointment during regular business hours.

****ALL PROFESSIONAL FEES ARE DUE AT THE TIME SERVICES ARE RENDERED****

Payment: I agree to pay for any and all services rendered by Hickory Veterinary Hospital at the time services are rendered. All checks, with the exception of business checks, will be deposited electronically via Telecheck services. There will be a \$50.00 fee for any unpaid checks. Hickory will not accept starter checks as payment. Interest of 18% annually (1.5% monthly) will accrue on any

outstanding balances after 30 days. If collection becomes necessary, I will pay all costs including attorney's fees at 33 ½ %. I will be responsible in full for collection and legal fees.

Preventative Care: To prevent the spread of infectious diseases and parasites, all hospitalized and boarded patients must be current on all vaccines and free of internal and external parasites. The vaccines required for dogs are Rabies, DACPP, and Bordetella. The vaccines required for cats are Rabies, FVRCP, and FELV. My signature below authorizes this level of preventative care and the appropriate charges will be assessed in the discharge invoice.

Prescriptions: An appointment may be required to refill some medications. We require that you call in prescription requests at least two business days in advance of when you need them refilled. If you lose a prescription for controlled substances (i.e. tramadol or phenobarbital) we will be unable to replace them or have them refilled early. This is necessary to ensure we are in compliance with Drug Enforcement Administration regulations and professional guidelines. This is the standard of practice in the Commonwealth of Virginia. We cannot be flexible with this policy. Also, please be aware that these drugs are kept in a lockbox and are not accessible when a physician is not present, such as during lunch hours.

Appointments: If you are ten minutes late or later for your appointment, we may need to reschedule in order to keep appointments running on time. We require 24 hour notice if an appointment needs to be cancelled. We have voicemail that is available should you need to cancel after hours. Call (757) 548-1548 and leave a message.

Photo Release: I grant to Hickory Veterinary Hospital the right to take photographs of me and my pets. I authorize Hickory Veterinary Hospital, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Hickory Veterinary Hospital may use such photographs of me with or without my name and for any lawful purpose, including such purposes as publicity, illustration, advertising, and Web content. **Accept** _____ **Decline** _____

I have read and understand the above:

Signature of Responsible Party

Date

For Office Use Only: WLS: _____ RLS: _____