

PET/OWNER RELATIONSHIP

So that we may meet your individual needs, please answer the following:

Check one:

- ☐ I feel that my pet is another member of my family.
☐ I feel that my pet is just a pet.

Check one:

- ☐ I want the best care available for my pet; please recommend anything that you feel is necessary.
☐ I want good medical care for my pet, but there is a limit to what I am able to have done.
☐ I want you to perform only the services that I request.

Check one:

- ☐ I want to learn as much as I can about pet care; please explain in detail what has been done or what is needed for my pet.
☐ I would prefer for you to just summarize what has been done or what is needed for my pet.
☐ I want my pet healthy but don't need to know what has been done.

Check one:

- ☐ I prefer to be present when my pet is examined and treated.
☐ I would rather not be present when my pet is examined and treated.
☐ I have no preference about being present while my pet is being examined and treated.

REFERRAL INFORMATION:

How did you become aware of our hospital?

☐ Other client ☐ Yellow pages ☐ Hospital sign ☐ Internet ☐ Other (please explain) _____

Whom may we thank for recommending us? _____

FINANCIAL INFORMATION:

Professional fees are to be paid at the time the services are rendered unless other arrangements have been made in advance. An estimate of fees will be given if requested.

Preferred method of payment: ☐ Cash ☐ Check ☐ Mastercard/Visa ☐ Care Credit

I hereby authorize the veterinary doctor(s) and staff of San Gabriel Animal Hospital to administer such diagnostic, treatment, surgical and anesthetic procedures as they deem necessary. I realize that no guarantee can be made regarding the results of these procedures. Further, I assume full financial responsibility for all charges incurred in the care of my pets. I also understand that these charges will be paid at the time of release and that a deposit may be required for more costly medical treatment or surgical procedures.

Signature of Owner or Responsible Party _____