

**HEALTHY PETS OF WESTGATE CLIENT REGISTRATION FORM**

**3588 W. Broad Street, Columbus, Ohio 43228**

**Telephone: 614-279-8415**

Client/Patient Account Number: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*Please check one of the following: [ ] New Client [ ] Current Client/ New Patient\*\*\*

Name: \_\_\_\_\_  
LAST name FIRST name MIDDLE INITIAL

Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Spouse/Significant Other's Name: \_\_\_\_\_

Spouse/Significant Other's Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Who recommended us to you? \_\_\_\_\_

Personal recommendation: \_\_\_\_\_ (list name)

Pet No. 1

Pet No. 2

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Circle: Dog Cat Other: \_\_\_\_\_

Circle: Dog Cat Other: \_\_\_\_\_

Circle: Male/Female Neutered/Spayed?

Circle: Male / Female Neutered/Spayed?

When and where last vaccinations done? \_\_\_\_\_

When and where last vaccinations done? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*\*MUST READ\*\*\* Due to increased number of fraudulent checks, there will be NO checks accepted on any new client accounts until that client has become established with our office for a period of one year. \_\_\_\_\_ initials**

I/We understand that the total amount is due and payable at the time services are rendered. All account balances are due upon release of your pet. Feel free to discuss your pet's treatment program and its cost with the doctor at any time. If Healthy Pets of Westgate, Inc., should require outside agents to collect any default amounts, all reasonable collections, finance charges, attorney fees and court costs will be my/our responsibility as well as all principal costs due.

\_\_\_\_\_  
signature or owner or authorized agent for owner

\_\_\_\_\_  
date

For office use only: information entered by: \_\_\_\_\_ (staff member's name)