



**CLIENT REGISTRATION**

6600 Centerville Business Pkwy  
Centerville, OH 45459

(937) 435-5622

Welcome to Evergreen Veterinary Hospital! Thank you for giving us this opportunity to care for your pet. Please help us meet your needs better by taking a moment to complete this information sheet.

Owner's Name \_\_\_\_\_ Spouse/Co-Owner Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip Code / County \_\_\_\_\_

Email \_\_\_\_\_

Primary Telephone \_\_\_\_\_ Secondary Telephone \_\_\_\_\_

(Spouse/ Co-Owner)

Primary Employer/Telephone \_\_\_\_\_ Secondary Employer/Telephone \_\_\_\_\_

(Spouse/ Co- Owner)

Other Emergency Contact/Telephone \_\_\_\_\_

How did you hear about Evergreen? Please circle all that apply.    Friend / Relative    Client    Doctor / Hospital    Sign

Humane Society    SICSA    Pet Store    Internet    Animal Shelter (Montgomery, Greene, Warren)

If a person or business referred you, whom may we thank? \_\_\_\_\_

**PROFESSIONAL FEES ARE DUE AT THE TIME SERVICES ARE PERFORMED**

We will gladly discuss fees or prepare a written estimate if you desire. A deposit may be required prior to performing certain procedures. We accept cash, checks, Visa, MasterCard & American Express. Please ask the receptionist or doctor if you have any questions.

I hereby authorize Evergreen Veterinary Hospital to examine, prescribe for and treat my pets. I assume responsibility for all charges incurred, and understand that these charges will be paid in full at the time of services, or upon patient discharge from the hospital.

Initial \_\_\_\_\_

**Pet Photo Consent:**

I \_\_\_\_\_, hereby give Evergreen Veterinary Hospital permission to use any photographs and/or videography taken of myself or my pet, in all its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become your property and will not be returned. I hereby authorize you to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing your program or for any other lawful purpose.

In addition, I waive any right to compensation arising or related to the use of the photograph. I hereby release rights to all claims, demands and causes to action which I or any other persons acting on my behalf. In signing this consent, I give authorization to use my name and my pet's name and information as printed below.

\_\_\_\_\_ *The above may NOT take photos of me and/or my pet*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Pet's Printed Name*

*Owner's Printed Name*

*Owner's Signature*