



Four Lakes Veterinary Clinic

4504 Monona Dr
Madison, WI 53716-1051
Phone: (608) 819-6750
staff@fourlakesvet.com
www.fourlakesvet.com

Client Information Sheet

Thank you for giving our clinic the opportunity to care for your pet(s).
So we may become better acquainted, please complete the following:

How did you hear about us?

Client Information:

Owner(s) first & last name(s):

Pronouns:

Address (number and street):

Address (city, state, zip):

Primary Phone Number:

Secondary Phone Number:

Employment:

Email Address:

Pet Information:

	Pet 1	Pet 2	Pet 3
Name:			
Species:			
Breed:			
Date of Birth/Age:			
Color/Markings:			
Gender:			

Please list all clinics where your pet(s) have previously received care:

Do we have permission to post your pet's photo on our website, social media sites and/or in advertisements?

Payment Policy

Full payment is expected upon rendering of services. Deposits may be required on major surgical cases, trauma cases and emergency work where hospitalization is required. We DO NOT carry open accounts. All major credit cards, cash, check and Care Credit are accepted at our clinic.

I agree that the above information is correct to the best of my knowledge and I have read and understand the payment policy listed above.

Signature of Owner or Authorized Representative:

Date:
