

VCA Liberty Animal Hospital

3810 River Run Dr.
Birmingham , AL 35243
(205) 970 - 0411

**New Client/Patient
Information Form**

Client Information

Name: _____	
Address: _____	Email 1: _____ Email 2: _____

How did you hear about VCA Liberty Animal Hospital?

Referred By: Internet / Website Google/Yahoo Yelp.com Veterinarians.com VCA Website
 New Mover / Offer (Email) Social Media (Facebook etc.) Yellow Pages (Book) Hospital Sign Newspaper
 Friend / Family / Colleague (Client): _____ Veterinarian _____
 Humane Society / Rescue: _____ Breeder / Pet Store: _____ Other: _____

D.O.B.: _____ Employer: _____ Employer's Address: _____ _____ City: _____ State: _____ Other Information: _____	D.O.B.: _____ Employer: _____ Employer's Address: _____ _____ City: _____ State: _____ Other Information: _____
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Patient Information

	Name: _____	Sex: _____
	Breed: _____	Birth: _____ Age: _____ Weight: _____

Staff Instructions: For additional patients, write information below, or reprint this document for each patient.

Patient Name: _____ Species: _____ Breed: _____ Color: _____
 Sex: _____ Birthdate: _____ Age: _____ Weight: _____

Patient Name: _____ Species: _____ Breed: _____ Color: _____
 Sex: _____ Birthdate: _____ Age: _____ Weight: _____

Please sign the following authorization for treatment: I hereby authorize the staff of VCA to render any treatment that is deemed necessary to my pet(s) health while in custody of the hospital. I understand that in the event of any unusual or emergency circumstances, the staff will make every attempt to contact me or my designated representative before, if time permits, proceeding with treatment. I understand that I will be financially responsible for all emergency procedures including the Estimate of Charges provided to me in person or over the telephone. I understand that professional fees are to be paid at the time services are rendered and a deposit is required on all pets admitted to the hospital.

Signature of Owner, Agent, or Good Samaritan	Date	Signature of Spouse	Date
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Please Circle Your Method of Payment: Cash - Check - Visa - MasterCard - Discover - American Express

For information on how we collect and use information about you and your pet, and how you may opt-out of some uses, please see our Privacy Policy at vcahospitals.com/privacy-policy.