



# Winter Park Veterinary Hospital

50 YEARS A Compassionate Commitment to Quality Pet Care

## NEW PATIENT INFORMATION

### Client Information

Client ID : \_\_\_\_\_ Last Name : \_\_\_\_\_ First Name : \_\_\_\_\_ Initial : \_\_\_\_\_

Address : \_\_\_\_\_ City : \_\_\_\_\_ State : \_\_\_\_\_ Zip : \_\_\_\_\_

Home Phone : \_\_\_\_\_ Cell Phone : \_\_\_\_\_ E-Mail : \_\_\_\_\_

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

Spouse/Significant Other : \_\_\_\_\_ Cell Phone : \_\_\_\_\_

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

E-Mail : \_\_\_\_\_

### Patient Information

Pet Name : \_\_\_\_\_ Nickname : \_\_\_\_\_

Species :  Canine  Feline  Avian  Small Mammal  Reptile  Other \_\_\_\_\_

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

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

Sex :  Male  Female  Spayed  Neutered  Undetermined

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

Payment is expected at the time services are rendered. All charges must be paid in full prior to discharge.

We accept cash, personal checks (with the necessary identification & approval), American Express, Discover, MasterCard, VISA, and debit cards. We have the right to refuse any personal check. Please make checks payable to Winter Park Veterinary Hospital. There is a \$25.00 returned check fee & collection will be actively pursued.

Fees are structured to support the most progressive, quality veterinary services possible. We encourage you to ask our receptionists about the cost of general services as well as to review & discuss with your doctor the estimate for your pet's treatment plan, so that you have time to make any necessary arrangements.

WPVH is committed to providing comprehensive, excellent veterinary services for your pet. We understand, at times, it may be necessary to discuss alternate forms of treatment. We are happy to help you explore these alternatives in order to arrive at the best plan for your family & pet.

A deposit of 50% of maximum estimated total for surgery, dental, extensive treatment, hospitalization and/or 1st time boarding is required at the time your pet is admitted. Please keep your copy of estimates. Remaining balance is due prior to discharge. Estimates are honored for 30 days.

Fee estimates are approximations of expected medical costs & can vary significantly. We will attempt to contact you regarding significant change in treatment/fees as they occur. It is essential you leave us with phone numbers where you can be contacted quickly.

We strongly suggest you ask daily about current charges during your pet's hospitalization in that they can change, & at times, increase significantly, based on the medical status of your pet. This is especially important prior to your pet's discharge appointment so that you can have any questions you might have answered.

We are happy to reschedule your pet's appointment/dental/surgery with a minimum of a 24-hour notice. Without this notice, it is necessary to charge a cancellation fee of \$30 to \$50, since doctor & technician time & specific surgical equipment are reserved exclusively for your pet.

**X**

I have read and agree to the financial requirements detailed above for all animals I bring to WPVH. Date \_\_\_\_\_ WPVH Staff \_\_\_\_\_

**We always welcome new patients and will be happy to serve your family and friends.**

1601 Lee Road Winter Park, FL 32789

Phone : (407) 644-2676 Fax : (407) 644-1312