



**WOODSTOCK**  
**Veterinary Hospital**

## WELCOME!

Thank you for giving our hospital the opportunity to care for your pet(s). We pride ourselves in offering high quality medical care and emphasize preventive medicine. We look forward to serving you and caring for your pet's needs for many years to come!

Name \_\_\_\_\_  
Address \_\_\_\_\_  
State \_\_\_\_\_

Spouse Name \_\_\_\_\_  
City \_\_\_\_\_  
Zip \_\_\_\_\_

**Phone Numbers:**

Home \_\_\_\_\_  
Cell \_\_\_\_\_  
Work \_\_\_\_\_

Spouse Cell \_\_\_\_\_  
Spouse Work \_\_\_\_\_

**E-mail address** \_\_\_\_\_  
(We use email to send you your pet(s) vaccine reminders)

### How did you hear about us?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> BNI Referral   | <input type="checkbox"/> Cherokee County Animal Control | <input type="checkbox"/> Cherokee County Humane Society |
| <input type="checkbox"/> Location/Sign  | <input type="checkbox"/> Dr. Bustelo & Dr. Salazar      | <input type="checkbox"/> Facebook/Social Media          |
| <input type="checkbox"/> Google Reviews | <input type="checkbox"/> Frugal Freddy Coupon           | <input type="checkbox"/> Internet Search                |
| <input type="checkbox"/> Pet Assure     | <input type="checkbox"/> Professional (Doctor) Referral | <input type="checkbox"/> Rescue Referral                |
| <input type="checkbox"/> Website        | <input type="checkbox"/> Community Vaccine Clinic       | <input type="checkbox"/> Friend/Family                  |

Whom may we thank for referring you? \_\_\_\_\_

### Terms of Service

We accept cash, VISA, Mastercard, American Express and Care Credit and checks as forms of payment. **PAYMENT IS REQUIRED AT TIME OF SERVICE.** Advanced minimum deposit of half of your estimate is expected for all animals left in the hospital for surgeries, treatment, diagnostics and first-time boarding.

Balances due over 30 days will be charged a 1.5%/mo interest charge (18% APR). Additional collection fees will be charged if your past-due account is sent to Collections or Small Claims Court.

All information I have provided here is true to the best of my knowledge. **I have read and understand the Terms of Service.**

Client Agreement & Signature: \_\_\_\_\_ Date: \_\_\_\_\_