

Animal Medical Center of Cumming, Inc.
Michael J. McLaughlin, D.V.M.

Welcome to our clinic. Please fill out all of the information to the best of your knowledge. Payment is due when services are rendered unless other arrangements have been made and received in writing PRIOR to the time of your appointment. We do work by appointments, however walk-ins are welcome and will be seen, giving first consideration to appointments. Of course, emergencies always take priority. If you have any questions or problems regarding our services or policies, please feel free to discuss them with the Hospital Administrator or Dr. McLaughlin.



OWNER INFORMATION:

DATE _____ NAME _____ SOCIAL SECURITY # _____

ADDRESS _____ SPOUSE'S/PARTNER'S NAME _____

CITY _____ STATE _____ COUNTY _____ ZIP _____

DRIVERS LICENSE NUMBER _____ STATE _____

HOME PHONE _____ BUSINESS PHONE _____

CELL PHONE _____ CELL PHONE SPOUSE/PARTNER _____

PLACE OF BUSINESS _____

SPOUSE/PARTNER'S PLACE OF BUSINESS _____ BUSINESS PHONE _____

WOULD YOU LIKE PET HEALTH NEWSLETTERS BY EMAIL? Yes No

WOULD YOU LIKE REMINDER CARDS SENT TO YOU WHEN VACCINES ARE DUE? Yes No

WOULD YOU ALSO LIKE REMINDERS SENT VIA EMAIL? Yes No

EMAIL ADDRESS: _____

PET INFORMATION:

NAME _____ BREED _____ MALE _____ FEMALE _____

HAS THIS ANIMAL BEEN NEUTERED _____ SPAYED _____

AGE _____ COLOR/MARKINGS _____

KNOWN MEDICAL CONDITIONS/ALLERGIES _____

LAST VACCINES GIVEN _____ DATE _____

WHERE _____ PHONE NUMBER _____

OTHER VETERINARIANS WHO HAVE SEEN YOUR PET _____

DO YOU HAVE ANY OTHER PETS? YES _____ NO _____

IF YES, WHAT KIND? CAT _____ DOG _____ OTHER _____

HOW DID YOU HEAR ABOUT US? _____

I AGREE TO PAY FOR ANY AND ALL SERVICES RENDERED BY THE ANIMAL MEDICAL CENTER OF CUMMING, INC. AT THE TIME THE SERVICES ARE RENDERED. THIS CONSTITUTES THE ENTIRE AGREEMENT OF THE PARTIES AND NO CHANGES WILL BE VALID UNLESS RECEIVED, IN WRITING, AND SIGNED BY BOTH PARTIES.

SIGNATURE _____ WILL YOU PAY BY CASH, CHECK, VISA/MASTERCARD, CARE CREDIT. THERE WILL BE A \$30.00 FEE FOR ALL RETURNED CHECKS.