

## Client Info Sheet

Owner's name: \_\_\_\_\_

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

Preferred phone number(s): #1 \_\_\_\_\_ #2 \_\_\_\_\_

Email: \_\_\_\_\_

Spouse/Partner: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### How did you hear about Carolina Family Vet?

Family/Friend/Neighbor: \_\_\_\_\_

Carolina Family Vet Team Member: \_\_\_\_\_

Online  Facebook  Rescue  Sign

### Please read and sign below:

I understand that all fees are due when services are rendered. I may pay with cash, check, credit card or Care Credit. There will be a service fee, in addition to any banking fees, for any returned checks. Should my account be referred to an independent collection agency, I understand that I am responsible for any additional cost such as collection fees, attorney fees and court costs. I hereby waive my rights of exemption under the law of the state of North Carolina and any other state.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**