



# Montezuma Veterinary Clinic

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## Welcome To Our Office

Welcome to Montezuma Veterinary Clinic. Thank you for choosing us for your animal health needs. So that we may provide the most comprehensive care for your animal, Please complete this data sheet.

Owners Name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_ - \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_ [ ] K-9 [ ] Feline [ ] EQ [ ] Bovine

Employer: \_\_\_\_\_ Work #: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Work # \_\_\_\_\_

In case of an emergency with your pet is there someone local we can call?

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

How did you hear about Montezuma Veterinary Clinic?

[ ] Friend or relative/who?

[ ] Yellow Pages/Which Directory?

[ ] Clinic Sign

[ ] Other

Who will be responsible for authorizing procedures and/or paying for services?

\_\_\_\_\_  
Signature

### **ALL FEES ARE DUE UPON RELEASE OF PATIENT**

Please indicate your choice of payment:

[ ] Cash

[ ] Check (I.D. Required)

[ ] Visa

[ ] MC

[ ] Discover