

# NEW CLIENT INFORMATION

*The Visiting Vet Mobile Veterinary Clinic  
Dr. Seely E. Rotigel*

Client Name: \_\_\_\_\_

Spouse or significant other: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Cell phone or pager: \_\_\_\_\_ E-mail: \_\_\_\_\_

Drivers License # or Social Security # \_\_\_\_\_

(For check cashing privileges)

Previous Veterinarian/Hospital: \_\_\_\_\_

Referred by: \_\_\_\_\_

(So we may thank them and enter them in the drawing)

Pet's name \_\_\_\_\_

Breed \_\_\_\_\_

Color \_\_\_\_\_

Birthdate \_\_\_\_\_

Weight \_\_\_\_\_

Sex M/F \_\_\_\_\_

Intact Spayed Castrated

Pet's name \_\_\_\_\_

Breed \_\_\_\_\_

Color \_\_\_\_\_

Birthdate \_\_\_\_\_

Weight \_\_\_\_\_

Sex M/F \_\_\_\_\_

Intact Spayed Castrated

**Please inform Dr. Rotigel of any special needs or conditions that your pet may have.**

**We strive to offer the very best care available for your pet!**

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\* **Drawing for PRIZES**

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\* New Client \_\_\_\_\_

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\* Referring Client \_\_\_\_\_

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\_\_ Drawing

\_\_ Date

\_\_ Computer entry

\_\_ NC card/letter

\_\_ Ref thank you