



# NEW CLIENT INFORMATION SHEET

Date: \_\_\_\_\_

Owner: \_\_\_\_\_

Spouse or  Ranch Manager: \_\_\_\_\_

Name of Ranch/Farm: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip

Mailing Address:  Same As Physical Address -or-  
\_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip

Owner's Number(s):  
Home Work  
Cell Fax

Preferred Contact Number:  Home  Work  Cell  
May we send text messages?  Yes  No

Spouse's or Ranch  
Manager's Number(s):  
Home Work  
Cell Fax

Preferred Contact Number:  Home  Work  Cell  
May we send text messages?  Yes  No

Owner's Email Address: \_\_\_\_\_

Spouse or Ranch Manager's Email: \_\_\_\_\_

May we email medical information (ie: test results) and financial information (ie: payment receipts)?  Yes  No

- 1) **Animal's Name (Nickname/Barn Name):** \_\_\_\_\_  
**Registered Name (If Applicable):** \_\_\_\_\_  
**Species:**  Horse  Dog  Cat      **Breed:** \_\_\_\_\_  
**Age or DOB:** \_\_\_\_\_      **Color(s):** \_\_\_\_\_  
**Gender:**  Male  Female      **Neutered:**  Yes  No      **Friendly To Strangers:**  Yes  No  
**Notes (ie: sensitive ears, bites when scared, etc.)** \_\_\_\_\_  
 \_\_\_\_\_
- 2) **Animal's Name (Nickname/Barn Name):** \_\_\_\_\_  
**Registered Name (If Applicable):** \_\_\_\_\_  
**Species:**  Horse  Dog  Cat      **Breed:** \_\_\_\_\_  
**Age or DOB:** \_\_\_\_\_      **Color(s):** \_\_\_\_\_  
**Gender:**  Male  Female      **Neutered:**  Yes  No      **Friendly To Strangers:**  Yes  No  
**Notes (ie: sensitive ears, bites when scared, etc.)** \_\_\_\_\_  
 \_\_\_\_\_
- 3) **Animal's Name (Nickname/Barn Name):** \_\_\_\_\_  
**Registered Name (If Applicable):** \_\_\_\_\_  
**Species:**  Horse  Dog  Cat      **Breed:** \_\_\_\_\_  
**Age or DOB:** \_\_\_\_\_      **Color(s):** \_\_\_\_\_  
**Gender:**  Male  Female      **Neutered:**  Yes  No      **Friendly To Strangers:**  Yes  No  
**Notes (ie: sensitive ears, bites when scared, etc.)** \_\_\_\_\_  
 \_\_\_\_\_
- 4) **Animal's Name (Nickname/Barn Name):** \_\_\_\_\_  
**Registered Name (If Applicable):** \_\_\_\_\_  
**Species:**  Horse  Dog  Cat      **Breed:** \_\_\_\_\_  
**Age or DOB:** \_\_\_\_\_      **Color(s):** \_\_\_\_\_  
**Gender:**  Male  Female      **Neutered:**  Yes  No      **Friendly To Strangers:**  Yes  No  
**Notes (ie: sensitive ears, bites when scared, etc.)** \_\_\_\_\_  
 \_\_\_\_\_

**PAYMENT:** Payment is due at the time of service. We accept cash, checks, Visa, MasterCard, Discover. Scratchpay pet care financing is also available. *Please let us know if you'd like more information about Scratchpay.*

***I hereby authorize the staff of Fredericksburg Equine Veterinary Services to examine, prescribe for, and/or treat the above described animal. I assume all responsibility for all charges incurred in the care of this animal and understand all charges are due at the time of service.***

**SIGNATURE:**

\_\_\_\_\_ **DATE:** \_\_\_\_\_

*Thank you for the opportunity to care for your pet. –Dr. Rob Franklin & Dr. Matt Moskosky*

**937 Leyendecker Road \* Fredericksburg, Texas 78624**