

BRIARCREST VETERINARY CARE CENTER
7313 E TANQUE VERDE RD
TUCSON, ARIZONA 85715
520-298-4123

Date _____

Name _____ Spouse's Name _____

Address _____ City _____ State _____ Zip _____

Home # _____ Work # _____ Other # _____

E-Mail _____

Address _____

Place of Employment _____ Spouse's

Employment _____

Name of person who normally brings pets in _____

Best time to reach you by phone _____

Please indicate payment choice (all fees are due at the time services are rendered).

Cash/Check Visa/Mastercard Discover American Express

How did you become aware of our clinic? Location Yellow Pages Previous Client Internet

Personal recommendation (whom we may thank?) _____

PATIENT INFORMATION #1

Pet's Name _____

Breed _____

Date of Birth _____

Color _____

Sex; spayed or neutered? _____

VACCINATION HISTORY (DOG)

Rabies _____

DAPLCPVCV _____

Bordetella _____

Heartworm Test/Prevention _____

Fecal _____

VACCINATION HISTORY (CAT)

Rabies _____

PCVR (Dist/Rhino/Chlamydia) _____

Leukemia _____

Feline Leukemia/FIV Test _____

Fecal _____

PATIENT INFORMATION #2

Pet's Name _____

Breed _____

Date of Birth _____

Color _____

Sex; spayed or neutered? _____

VACCINATION HISTORY (DOG)

Rabies _____

DAPLCPVCV _____

Bordetella _____

Heartworm Test/Prevention _____

Fecal _____

VACCINATION HISTORY (CAT)

Rabies _____

PCVR (Dist/Rhino/Chlamydia) _____

Leukemia _____

Feline Leukemia/FIV Test _____

Fecal _____

Our pet(s) are: Member of our family Childs Pet Backyard Pet

Any previous illnesses or surgeries? _____

Any allergies to vaccinations or medications? _____

Is your pet on any special medications or diets? _____

Do you have pet insurance for yor pets? yes/ no

If yes, which pet insurance carrier do you have? _____

PET SERVICES TODAY AND NO PAYMENT REQUIRED!! (ask the Receptionists for details about CareCredit and our Wells Fargo Revolving Charge - both interest free)