



# Animal Wellness and Healing Center

## Patient Registration

Patient Name \_\_\_\_\_ Species \_\_\_\_\_ Date of Birth/ Age \_\_\_\_\_

Breed \_\_\_\_\_ Color \_\_\_\_\_ Sex \_\_\_\_\_ Spayed/Neutered \_\_\_\_\_

Previous/ Regular Vet \_\_\_\_\_ Permission to acquire records \_\_\_\_\_

Is your pet up to date on vaccines? \_\_\_\_\_ Last date given? \_\_\_\_\_

Has your dog been tested for Heartworm? \_\_\_\_\_ Lyme? \_\_\_\_\_ in the past year? Last done? \_\_\_\_\_

Has your cat been tested for FELV/FIV in the past? \_\_\_\_\_ Last done? \_\_\_\_\_ Indoor/Outdoor/Both \_\_\_\_\_

Is your pet on flea/tick prevention? \_\_\_\_\_ If so, what do you use? \_\_\_\_\_

Where do you purchase flea and tick prevention? \_\_\_\_\_

Is your pet on monthly heartworm prevention? \_\_\_\_\_ If so, what do you use? \_\_\_\_\_

Where do you purchase heartworm prevention? \_\_\_\_\_

Do you have any additional pets? \_\_\_\_\_ If so, tell us about them \_\_\_\_\_

What is your pet's lifestyle? \_\_\_\_\_

Do you take your pet to the dog park? \_\_\_\_\_ groomer? \_\_\_\_\_ daycare? \_\_\_\_\_ boarding? \_\_\_\_\_

What is your pet's current diet? \_\_\_\_\_

Do you give your pet any treats? \_\_\_\_\_ If so, what kind? \_\_\_\_\_

**OVER →**

