



9000 Holman Rd NW Seattle, WA 98117
Tel: (206) 706-7800 info@sunsethillvet.com

Client Registration:

Owner Name: _____ Phone: _____
Pronouns: ☐ he/him ☐ she/her ☐ they/them ☐ : _____

Owner Name: _____ Phone: _____
Pronouns: ☐ he/him ☐ she/her ☐ they/them ☐ : _____

Address _____ City _____ State _____ Zip _____

Email(s) _____

During regular office hours how would you generally prefer we contact you:

☐ First Phone Number ☐ Second Phone Number ☐ Email

How did you hear of our clinic?

☐ Sign/Walking By ☐ Referral ☐ Recommendation ☐ Advertising

If recommended, by whom? _____

Pet Health History:

Name of pet _____ ☐ Dog ☐ Cat

Breed _____ Color _____ Age _____ Birth date if known _____

☐ Male ☐ Neutered ☐ Female ☐ Spayed **Pet Insurance Provider:** _____

Patient Records:

☐ Yes, I would like you to request a copy of my pet(s) previous records. My previous vet is: _____

☐ No, I will call my previous vet to have them fax a copy of my pet(s) records to you.

Reason for visit: _____

Authorization:

- I hereby authorize the veterinarian to examine, prescribe for, or treat the above-described pet.
- I assume responsibility for all charges incurred in the care of this animal.
- I also understand that professional fees are due at the time services are rendered and that a deposit may be required for surgical treatment.

We will gladly prepare a written estimate if you desire. Please ask any staff member.

Signature: _____ Date: _____

Please flip over for second side!

Video-Photo Release

*I grant **Sunset Hill Veterinary & Rehabilitation Center**, its representatives and employees the permission to take pictures and/or video of me and/or my pet(s), and to use, copyright, and/or publish the same in print and/or electronically.*

*I agree that **Sunset Hill Veterinary & Rehabilitation Center** may use such pictures and/or video of me and/or my pet(s) with or without the name(s) of my pet(s) and/or my name and for any lawful purpose, including, for example, such purposes as educational, publicity, advertising, and Web content.*

☐ The above may take photos of me and/or my pet(s)

☐ The above may **NOT** take photos of me and/or my pet(s)

Pet name: _____

Signature: _____ Date: _____

Please flip over for second side!