



MARLOW VETERINARY CLINIC
161493 N. Hwy 81, Marlow, OK 73055 580-658-5478
marlowvet@hotmail.com marlowvet.com

Welcome to the Marlow Veterinary Clinic. We are pleased that you have chosen us to care for your pet. Please complete this form so that we have a correct and current file to provide you and your pets with the best care.

NAME: _____

ADDRESS: _____ **PHONE:** _____ **CELL:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PLACE OF EMPLOYMENT: _____ **WORK PHONE #** _____

E-mail Address: _____

SPOUSE'S NAME: _____

SPOUSE'S EMPLOYER: _____ **WORK PHONE #:** _____

PET INFORMATION: _____

Name	Dog	Cat	Breed	Sex	S/N	Color	Birthdate	Previous Vaccinations

Due to the high cost of billing, all small animal services are payment at the time of service. We accept cash, check, Visa, MasterCard, Discover, American Express and CareCredit. If it is necessary to leave your pet for treatment or surgery, 50 percent of the estimated charges are due upon admission and the balance when the pet is dismissed.

If this account becomes delinquent, I claim responsibility for the bill and any finance/collection charges added to the bill. **NO HOLD CHECKS WILL BE ACCEPTED.**

We appreciate your cooperation in this matter.

Date: _____ **(Signature)**