

Pet 1 Information

Pet's Name: _____ () dog () cat () other
Sex ()M ()F Spayed/Neutered : () yes ()no
Birthdate/Age : _____ Breed: _____
Color: _____ Microchipped? () yes () no

Pet 2 Information

Pet's Name: _____ () dog () cat () other
Sex ()M ()F Spayed/Neutered : () yes ()no
Birthdate/Age : _____ Breed: _____
Color: _____ Microchipped? () yes () no

If you have paperwork or vaccine history for your pet please provide this to the receptionist at check-in.

Last Veterinarian _____
Date _____ Phone # (_____) _____

Appointment Policy:

I understand that I will be charged a \$33 non-cancellation fee for any appointment that I have scheduled for which I do not show or call 24 hours in advance of the appointment time to cancel. Failure to pay this fee will be treated the same as any other unpaid balance on my account which is subject to interest and collections.

Initials _____

Boarding Reservation Policy:

I understand that I will be charged a fee of half the cost of my pets scheduled boarding as non-cancellation fee for any reservation that I have scheduled for which I do not show or call 48 hours in advance of the appointment time to cancel. Failure to pay this fee will be treated the same as any other unpaid balance on my account which is subject to interest and collections.

Initials _____

Signature _____ Date _____

Waiver and Release for Use of Photographs

I give permission for the staff of Copper Ridge Animal Hospital to take photographs of my pet and use the photographs in non-profit promotional activities; such as the hospital's website and social networking sites (Facebook). Any photographs taken will become property of CRAH. Owners' names will not be used in any photograph captions.

Please sign one:

Yes, I agree _____

No, I don't agree _____

Date _____

VETERINARY DISCLOSURE FORM

I understand that Copper Ridge Animal Hospital is not staffed twenty-four (24) hours a day and after hour treatment of patients is at the discretion of the veterinarian. Business and medical staffing hours are:

Monday-Friday 7:00 AM-5:30 PM

Saturday 8:00 AM-10 AM-BOARDING ONLY

Sunday/Holidays Closed

We have no in-house, on-duty continuous medical staff care at these times:

- 1. Overnight from 5:30 PM-7 AM Monday-Friday**
- 2. Weekends from Friday 5:30 PM to Monday 7 AM**
- 3. Holidays**

Emergencies are handled by the Shenandoah Valley Regional Veterinary Emergency Clinic in Verona. The telephone number is 540-248-1051. The hours are from 6 PM to 8 AM Mon-Thurs and 6 PM Friday thru 8 AM Monday. Please call ahead.

Signature _____ Date _____