

FOUR SEASONS ANIMAL HOSPITAL

10624 Randolph Street • Crown Point, Indiana 46307 • Phone 663-8387 (VETS)

CLIENT REGISTRATION

Thank you for giving Four Seasons Animal Hospital the opportunity to care for your pet. So that we may become better acquainted, please complete the following:

Ms.		Ms.	
Mrs.		Mrs	(0)
Mr.	(Owner's Name)	Mr.	(Spouse)
Dr.		Dr.	
Address		(Cit.)	(Zip code)
	(Street)	(City)	(Zip code)
Dhanas			
Phones	(Home)	(Owners Cell)	(Spouse's Cell)
		(Owners Work)	(Spouse's Work)
Please provide vo	our email address if you wish to	receive information via email	
			est. Vou will be given an itemized
receipt with each	h visit. Please do not hesitate ed prior to hospitalization. Ho	to ask how much treatment will	pet. You will be given an itemized cost before it is started. A depositnen services are provided or uponer and CareCredit are accepted.
0.73		Pages Sign Internet	Other
Substitution because of the substitution of th	may we thank for referring?	3-00 termina 350 termina	
Our goal is to prit a privilege to us know.	rovide the highest quality care care for your pet(s). Should	for your pet and offer the best po you have ideas or suggestions	essible service to you. We consider to improve our service, please let
I/We agree to future account appraisement la	of mine is turned over to o	nd reasonable attorney fees in our attorneys for collection, all	the event this account or any without relief from valuation and
SIGNATURE		SIGNATURE	
(PRINT)		(PRINT)	
DATED		DATED	
The State of the S			

SERVICES AVAILABLE IN THIS HOSPITAL

- I. Professional Services:
 - A. Hospitalization
 - 1. Intensive Care
 - 2. Transfusions
 - B. Emergency Service Dial 663-VETS

- C. Laboratory
 - 1. Parasite Exams
 - 2. Blood Work
 - 3. Cytology/Pathology
- D. Surgery
- E. Dentistry
- F. Radiology

- G. Fully Stocked Pharmacy
- H. Laser Therapy
- II. Non-Professional Services
 - A. Grooming
- B. Day Spas
- C. Boarding
- D. Daycare