



# Welcome to Weymouth Landing Cat Clinic and Hotel

## Tell Us About Yourself

<b>Name</b>			
	Last Name	First Name	Middle Initial
<b>Address</b>			
	Street	City	State      Zip
<b>Telephone</b>			
	Home Number	Mobile Number	Work Number
<b>E-mail</b>	We are increasingly able to provide you with periodic reminders and care notes by email. Please let us know what email address is convenient for you.		
			Example: name@yahoo.com

## Tell Us About Your Cats

Name	Breed	Date of Birth	Sex	Color

## How Did You Hear About Us?

Our clients and staff love to refer their friends and families to us.  
If you were referred to us, please let us know who we can thank!

Otherwise, please select from the list below:

Yellow Pages     
  Internet     
 |     
  Signage     
  Advertisement

Other \_\_\_\_\_

*Thank you for choosing us to care for your pet!*

I, the undersigned, authorize Weymouth Landing Cat Clinic & Hotel and its employees to treat, prescribe and administer medications to my pet(s) as necessary. I understand that my pet(s) must be current on all vaccinations before being admitted to the hospital. I understand that professional fees must be paid at the time of service.

If you intend to pay for services by check, we must have you provide your license or social security #. A service fee of \$15.00 plus any bank fees will be applied to any returned checks. Also, a 1.5% service fee plus \$6.00 will be applied to any balances carried over 30 days.