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CARNEGY ANIMAL HOSPITAL

CLIENT INFORMATION

We appreciate the opportunity to care for your pet.
 We will gladly prepare a written estimate if you desire, please ask the veterinarian or staff person.

ALL FEES ARE TO BE PAID AT THE TIME SERVICES ARE RENDERED.

This is not a reflection of your credit.

Name of Pet
 Owner: _____ Home: _____ Bus: _____ Cell: _____

Civic address _____

Mailing Address _____ Postal Code _____

Co-Owner(s) of
 Pet/Spouse _____

(It is important to identify all owners of the pets as we only release information to the named pet owner(s).)

Email Address _____

(Please note that reminders are usually mailed through Canada Post unless you request email reminders.)

Please let us know your preferred contact number _____ May we call you at your business? Yes No

Contact person in case of
 emergency _____ Tel _____

PET INFORMATION

Name	Canine	Feline	Other	Breed	Sex**	Color	DOB	Microchip	Other ID

** CODE: Female (F) Female Spayed (FS) Male (M) Male Neuter (MN)

Discounts on some services are provided if you own three pets (10%), more than three pets (15%) or if you are a senior (65+) at 10%. Once entered into our software program, discounts are applied automatically to invoices.

How did you find out about our hospital?

Individual ___ Whom may we thank for referring you? _____

Hospital Sign ___ Yellow Pages ___ Google ___ Web Page ___ Yelp ___ Other ___

Signature: _____ Date: _____ (d/m/y)



May we sign
 you up for
 our Online
 Webstore?
 Yes No

How do we retain and safeguard your personal information? We retain personal information for as long as necessary to fulfill the purposes for which it was collected and as permitted or required by law. We have implemented physical, organizational, contractual and technological security measures to protect your personal information from loss or theft, and unauthorized access, disclosure, copying, use or modification.