

**Paw Prints Ltd Veterinary Hospital**  
**8046 S. Memorial**  
**Tulsa, OK 74133**  
**918-250-0883**

**Client Information**

Date \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Drivers License # \_\_\_\_\_  
Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Email \_\_\_\_\_  
Would you like to sign up for text or email reminders \_\_\_\_\_  
Referred by \_\_\_\_\_

*Paw Prints Ltd does not do billing of any kind. Payment is due in full at time of services.*

**Method of Payment**

Cash \_\_\_ Check \_\_\_ Credit Card \_\_\_ Care Credit \_\_\_

**Patient Information**

Name \_\_\_\_\_  
Species \_\_\_\_\_ Breed \_\_\_\_\_  
Birthday \_\_\_\_\_ Sex \_\_\_\_\_  
Color/Markings \_\_\_\_\_

*\*Paw Prints Ltd Veterinary Hospital requires that all pets be current on all vaccines including corona virus and bordatella, parasite screens and parasite free. We will be happy to perform any of these vital health screens for your pet upon arrival. \**

**Medical History**

Pervious Veterinary Hospital \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Date of last vaccinations \_\_\_\_\_  
Date of last heartworm test \_\_\_\_\_  
Name of heartworm prevention used \_\_\_\_\_  
Last dose given \_\_\_\_\_  
Date of last intestinal parasite screen \_\_\_\_\_  
Pervious surgeries \_\_\_\_\_ Date \_\_\_\_\_  
Pervious illness \_\_\_\_\_  
Any known drug allergies? \_\_\_\_\_  
Any known behavior issues? \_\_\_\_\_  
Does your pet take daily medicine? \_\_\_\_\_  
If yes please all medication \_\_\_\_\_

Present problem or illness \_\_\_\_\_