



Welcome!

New Client Information

Primary Owner

Title: Mrs. Mr. Miss Dr.

First Name: _____ M.I. ____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary Contact Number: (_____) _____ - _____ Cell Home Work

Alternate Contact Number: (_____) _____ - _____ Cell Home Work

Alternate Contact Number: (_____) _____ - _____ Cell Home Work

Email Address: _____

I do NOT authorize any other person to make decisions regarding the medical care of my animal(s).

I authorize the following person(s) to make decisions on my behalf regarding the medical care of my animal(s). I understand that I am solely responsible for any payments due:

Name: _____ Contact: (_____) _____ - _____

Relationship: _____

Name: _____ Contact: (_____) _____ - _____

Relationship: _____

Name: _____ Contact: (_____) _____ - _____

Relationship: _____

How did you hear about Willow Point? _____

Who can we thank for referring you? _____

Primary Veterinarian Information

Name of Veterinary Clinic/Hospital: _____

Name of Veterinarian: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Number: (_____) _____ - _____

Email: _____

I authorize Willow Point Veterinary Acupuncture, LLC to contact my primary veterinarian or other veterinarians on staff at my primary veterinary clinic/hospital to discuss my pet's medical history and treatment.

I do NOT authorize Willow Point Veterinary Acupuncture, LLC to contact my primary veterinarian or other veterinarians on staff at my primary veterinary clinic/hospital to discuss my pet's medical history and treatment. I understand that if I choose this option, Willow Point Veterinary Acupuncture, LLC reserves the right to decline treatment for certain conditions, to be determined on a case by case basis.

I, _____, understand that Willow Point Veterinary Acupuncture, LLC only provides traditional Chinese veterinary medical options, including acupuncture and herbal therapy. Any care beyond this scope must be provided by an alternate veterinary clinic or hospital of my choosing. I understand that Willow Point Veterinary Acupuncture, LLC does NOT provide emergency services.

Please initial each line to acknowledge the following statements:

_____ As with all veterinary treatments, Willow Point Veterinary Acupuncture, LLC cannot guarantee a successful outcome. An unsuccessful outcome does not warrant reimbursement.

_____ Although acupuncture, aquapuncture, hemapuncture, and electroacupuncture are generally safe treatment options, a small risk of complication always exists. Complications may include, but are not limited to: bleeding, pain, inflammation, or infection at needle placement site; local or systemic immune response; adverse behavioral response to treatment; retained or broken needles; drowsiness.

_____ Herbal therapy, under the guidance of a veterinarian, can be used to treat many conditions. Inappropriate use of herbal formulas can lead to adverse events. Therefore, herbal dosage instructions need to be explicitly followed. Adverse effects most commonly include, but are not limited to: diarrhea, vomiting, inappetence.

_____ Although beneficial in most circumstances, traditional Chinese veterinary treatments (such as acupuncture and herbal therapy) may not be appropriate for some patients or medical conditions.

_____ Full payment is due at time of service. Payment options include cash and major credit cards.

Signature: _____

Date: _____