

Champlain Valley Veterinary Services, P.C.

408 Route 3
Plattsburgh, NY 12901

Telephone 518-563-5551



Contact Information

Last				First			Title		
Address				Zip					
City			State		Phone	Fax No			
County				Work	Cell				
				Email					

Personal Information

Are You 18 or Older?	Yes	No	Do you qualify for our Senior Discount?	Yes	No	
SSN			License			
Employer				Spouse		
Preferred Doctor				Referred By		

Patient / Pet Information

Pet Name						
Species (circle one)	Canine	Feline	Rodent	Reptile	Avian	Other
Breed				Color		
Sex (circle one)	Male	Neutered Male	Female	Spayed Female		
Birthday			Weight			

Previous Vaccinations / Test Information

	Date	Date	Other
Canine Bordetella		Feline Distemper	
Heartworm Test		Feline Leukemia test	
Spay / Neuter		Feline Leukemia vaccination	
Physical Examination			
Rabies 1 yr.		Flea Prevention	
Rabies 3 yr.		Heartworm prevention	
Canine Distemper / Parvo			
Lyme vaccination			

Additional pet(s)?

****Payment is expected at the time services are provided****

Cash Visa Mastercard Discover Care Credit Check (with a copy of credit card)

Champlain Valley Veterinary Services accepts VISA, MasterCard, Discover, Care Credit, Checks and Cash. A \$50 service fee will be applied to all returned checks. Balances over 30 days will be subject to an interest rate of 1.5% per month. All collection agency and attorney fees necessary to collect an overdue balance will be added to the bill. Deposits of 50% will be required for all major medical, surgical, trauma and emergency cases. All services must be paid in full before the animal can be released. Champlain Valley Veterinary Services is not staffed 24 hours. A doctor is on call after normal business hours, Sundays, and holidays. The hospital is open Monday – Friday 7:30 a.m. to 7:30 p.m. and Saturday 9:00 a.m. – 5:00 p.m.

Client Number _____

Signature of owner/responsible party _____



ADDITIONAL PET(S)

Contact Information

Last First Title

Patient / Pet Information

Pet Name

Species (circle one) Canine Feline Rodent Reptile Avian Other

Breed Color Age

Sex (circle one) Male Neutered Male Female Spayed Female

Birthdate Weight

Previous Vaccinations / Test Information

	Date	Date	Other
Canine Bordetella		Feline Distemper	
Heartworm Test		Feline Leukemia test	
Spay / Neuter		Feline Leukemia vaccination	
Physical Examination			
Rabies 1 yr.		Flea Prevention	
Rabies 3 yr.		Heartworm prevention	
Canine Distemper / Parvo			
Lyme vaccination			

Patient / Pet Information

Pet Name

Species (circle one) Canine Feline Rodent Reptile Avian Other

Breed Color Age

Sex (circle one) Male Neutered Male Female Spayed Female

Birthdate Weight

Previous Vaccinations / Test Information

	Date	Date	Other
Canine Bordetella		Feline Distemper	
Heartworm Test		Feline Leukemia test	
Spay / Neuter		Feline Leukemia vaccination	
Physical Examination			
Rabies 1 yr.		Flea Prevention	
Rabies 3 yr.		Heartworm prevention	
Canine Distemper / Parvo			
Lyme vaccination			