NEW CLIENT REGISTRATION FORM

The Cat Clinic, 38 Blackford Avenue, Edinburgh, EH9 2PP. Tel: 0131 4667110

Completed forms may be either:

- Completed / Brought along to the first appointment
- Emailed prior to the first appointment to nurse@catclinic.co.uk

Owners Details Please read both our Privacy Notice and Terms and Conditions and complete and sign form below.

Title:		First name:	
		Surname:	
Address			
Postcode			
Contact telephone(s)			
mobile			
email			

Cat Details #1:

Name			
Breed			Longhaired / Shorthaired
Colour			
Age / D.O.B.			
Sex (please circle)	Male Male Neutered Female Female Neutered		
Microchipped	Yes / No	Insured	Yes / No
Lifestyle	Indoor only Supervised outdoors only Free Roaming		

Cat Details #2

Name			
Breed			Longhaired / Shorthaired
Colour			
Age / D.O.B.			
Sex (please circle)	Male Male Neutered Female Female Neutered		
Microchipped	Yes / No	Insured	Yes / No
Lifestyle	Indoor only Supervised outdoors only Free Roaming		

Have your cat(s) been to a vet previously? If so, we will contact your previous practice to obtain your pets medical history. This is a normal process and will cause no offence to your last veterinarian.

Previous Vet Name……

Address……

Telephone……

How did you find out about The Cat Clinic? ……

I have read and understood the Terms and Conditions ☐

I have read The Cat Clinic Privacy Notice ☐

I am happy to be contacted for the purposes of:

Vaccination/health reminders ☐ Appointment reminders ☐ Clinic News ☐

You may contact me for these purposes by:

Post ☐ SMS (text message) ☐ email ☐

Signed……

Date……