



310 Dewey St PO Box 370 Foley, MN 56329 (320)968-6677

**Client Update Information**

Date \_\_\_\_\_

In order to continue giving your pets the best care possible, we would like to get to know you and your pet better. As you fill out the information below, **please know that all patient and client information is CONFIDENTIAL and will NOT be shared with anyone outside of the Mille Lacs and Becker Veterinary Clinics.**

<p><b>Primary Owner</b> _____</p> <p>Address _____</p> <p>City/ST/Zip _____</p> <p>Hm Phone _____</p> <p>Wk Phone _____</p> <p>Cell _____</p> <p>Email _____</p> <p>Occupation _____</p>	<p><b>Secondary Owner</b> _____</p> <p>Relationship to Primary _____</p> <p>Hm Phone _____</p> <p>Wk Phone _____</p> <p>Cell _____</p> <p>Email _____</p> <p>Occupation _____</p>
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**How did you hear about us? Please circle:**

- |          |                |                    |
|----------|----------------|--------------------|
| Website  | Newspaper      | Yellow pages       |
| Facebook | Humane Society | Rescue group       |
| Groomer  | Trainer        | Friend or Relative |

Other (please specify) \_\_\_\_\_

Is there someone we can thank? \_\_\_\_\_

**ARE YOU INTERESTED** in receiving information on your (check all that apply)

- Pet's medical concerns, specifically \_\_\_\_\_
- Pet behavior and training  Other \_\_\_\_\_

**OTHER INFORMATION:**

Total # of persons in your household \_\_\_\_\_ Ages (circle) 1-6, 7-18, 19-50, 51-90

- Do you consider your pet a/an (check all that apply)  Member of the family  Indoor pet  Outdoor pet
- Hunting dog  Show pet  Therapy pet  Breeding animal  Other \_\_\_\_\_

**THANK YOU FOR VISITING US TODAY!**