



Town & Country Veterinary Service
98 Ford Road, Suite 3A, Denville, NJ 07834

New Client Form

Name: _____

Address: _____

Cell Phone: _____ Home Phone: _____

Driver's License: _____ Email: _____

Boarding at: _____ Trainer: _____

Animal Name: _____ Registered Name: _____ USEF# _____

Age: _____ Breed: _____ Sex: _____ Color: _____ Microchip: _____

Animal Name: _____ Registered Name: _____ USEF# _____

Age: _____ Breed: _____ Sex: _____ Color: _____ Microchip: _____

Animal Name: _____ Registered Name: _____ USEF# _____

Age: _____ Breed: _____ Sex: _____ Color: _____ Microchip: _____

Payment Information:

Visa/Mastercard/Discover/Amex: _____ - _____ - _____ - _____

Expiration: _____ / _____ Security Code: _____ Zip Code: _____

I authorize Town and Country Veterinary Service to process my payment (check one):

At the time of service At the end of the month in which service was provided
Owner requests communication beforehand if amount is over _____ (i.e. \$1000+)
Text Call Email

Yes, I authorize medical decisions to be made on my behalf by my: trainer barn manager
 MYSELF ONLY

Client Signature: _____ Date: _____

Any balance not paid **after 30 days** will be charged to the card on file.