

Personal Information

First Name	Last Name
Street	
ZIP/Residence	
Phone	Mobile
e-mail	

Information Animal

Name	Date of Birth				
Species	Race				
Fur/colour	Weight				
country of origin	Mikrochip-Number				
Sex	<input type="radio"/> femal	<input type="radio"/> male	neutred	<input type="radio"/> Yes	<input type="radio"/> No
Health Insurance		<input type="radio"/> Yes <input type="radio"/> No			
Name of Insurance company					

Veterinarian

Veterinarian	
Referring Veterinarian	

Information about your actual concern:

Please discribe briefly your problem and your concerns	
Does your dog suffer from allergies?	<input type="radio"/> Yes <input type="radio"/> No
Type of Allergies?	
Has your dog ever been operatet on?	<input type="radio"/> Yes <input type="radio"/> No
Type of operation? When?	
Does your dog need medication regularly?	<input type="radio"/> Yes <input type="radio"/> No
Name of medication? Dosage?	
Other infos (f.i. does not like to be touched / Neg. experiences at the veterinarian etc.)	

How did you learn about us?

<input type="radio"/> Vet/clinic	<input type="radio"/> Internet / Homepage
<input type="radio"/> Facebook	<input type="radio"/> Recomandation
<input type="radio"/> Others	

Cancellations

We reserve the right to charge for appointments cancelled less than 24 hours in advance.

Use of your personal data

With your Signature you confirm that the data you passed on to us are correct. This helps us to develop an optimal therapy plan for your animal. We can assure you that your data remain exclusively in our files. Without your prior consent they will not be passed on to third parties or published.

To document therapeutic progress we may take photo or videos of your animal. Without your explicit consent this material will stay exclusively in our files.

In case we would like to share particularly interesting cases with colleagues and other professionals, would you agree to the publication of visual material of your animal...

...on our homepage?

...on facebook?

...No, I do not wish photographic material of my animal to be passed on without my explicit consent.

Payment

Payment is due after each session. Individual payments can be made by Twint or CreditCard. Subscriptions for therapeutic sessions become fully due in advance of the first appointment and are to be paid in cash or by bill. Should you require bill, we will charge you with CHF 10.-. If you desire cost summary (f.e. for insurance), we will charge you with CHF 20.-.

Place, Date


Signature

You can find additional information about our Physio-Therapy Practice for animals on our homepage

tierphysio-praxis.ch

or on

facebook.com/tierphysiopraxis

Of course we are pleased if you like  what you see!

Moreover, if you are satisfied with our therapeutic work, we are glad if you share this information with others, and of course also on google!