

**JUNALUSKA ANIMAL HOSPITAL AND URGENT CARE**  
3248 ASHEVILLE ROAD  
WAYNESVILLE, NC 28786  
PHONE: 828-452-1478 FAX: 828-452-5856

**\*\* ALL INFORMATION IS REQUIRED \*\***

**CLIENT INFORMATION**

Owner Name: \_\_\_\_\_

(First, Middle Initial, Last)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Owner's Cell Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Spouse Name / Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

Drivers License #: \_\_\_\_\_

Owner's Date of Birth: \_\_\_\_\_

Are you or an immediate family member associated with the Military / First Responder?

\_\_\_\_\_  
Primary Veterinarian Clinic (if not Junaluska AH): \_\_\_\_\_

(Your pet's records will be faxed to your Veterinarian after your visit)

**PATIENT INFORMATION**

Pet Name(s) : \_\_\_\_\_

Pet Age(s) and Breed(s): \_\_\_\_\_

Gender: (circle one)    Male            Neutered Male            Female            Spayed Female

Color: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Pet Insurance Provider: \_\_\_\_\_

**\*\*PAYMENT IS DUE IN FULL AT TIME OF SERVICE OR PRODUCT PURCHASE\*\***

*We accept cash, check, all major credit cards, Care Credit, Scratchpay, and iCare Financial*