

15714 Huebner Road, Bldg 1 San Antonio, TX 78248 (210) 579 - 0518 www.smithandshedd.com

Client Information:

Mrs. / Ms. / Mr. / Dr. Owner First Name:			Last Name:		
Spouse/Family/Friend First Name:			Last Name:		
Address:			Apt/Unit#:		
City: State:	Zip Code:				
Primary/Main Phone #:	I	Cell [☐ Home ☐	Work□	
Secondary Phone #:	1	Cell [☐ Home ☐	Work \square	
Additional Phone #:	I	Cell [☐ Home ☐	Work \square	
E-mail Address:					
▶ How did you hear about us? ☐ Social Media ☐ Mailer Ad					
Pet Information:					
Species: ☐ Canine ☐ Feline Sex: ☐ Male ☐ Fe	male	→	☐ Spayed / Ne	eutered	
Name			Age/DOB:		
<u> </u>			olor:		
Microchip #:					
Does your pet have any allergies? 🔲 No 🖵 Yes, Please explain: _					
Has your pet ever had a reaction to vaccines? $\ \square$ No $\ \square$ Yes, Pleas	se List	:			
List any medications your pet is currently on:					
List any surgeries your pet has had:					
What diet is your pet currently on?:					
*Social Media Consent:					
☐ By checking this box, I hereby authorize S&S Family Pet Hospi photographs of my pet(s) to use and publish in print and/or electinstagram) (owner initials)		•	•	•	
DOWNLOAD TODAY: S&S App for Smartphone Devices					

Search: "Smith & Shedd" on your phones app store or play store; when setting up a new account, email address must match the one listed above.

- View upcoming vaccine/test/exam due dates
- Schedule appointments or request medication or food refills
- Receive pictures or notifications while your pet is in our care
- Keep up to date on all monthly and daily specials
- Become a Rewards member and start earning your way to \$100 credits