



REPLY TO
ATTENTION OF

**DEPARTMENT OF THE ARMY
PUBLIC HEALTH COMMAND DISTRICT – HOOD
FORT BLISS VETERINARY SERVICES
FORT BLISS, TX 79906**

CLIENT REGISTRATION

Thank you for choosing our clinic. We pride ourselves on offering high quality medical care. Please complete this form so we can accurately enter your information into our files. To register with us, you must be at least 18 years of age and provide a current military ID card.

The following information is required for your account and is strictly **CONFIDENTIAL**:

Sponsor's name (Rank, Last name, First name, MI) _____

Spouse name: _____

E-Mail address: _____

Have you been seen at a military veterinary clinic in the last 2 years? Yes/No

Do you live in military housing? Yes/No

Home Address, including zip code: _____

Sponsor's Unit: _____ Commander: _____

Unit 1SG: _____ 1SG phone number: _____

Phone numbers	Sponsor	Family member
Home		
Cell		
Work		

Understand that payment is due when services are rendered. We do not offer any payment plans or split-pay options. We only accept Visa, MasterCard, cash, or personal checks. Please feel free to ask for an estimate prior to receiving services.

If at any time you are not satisfied with our services, please inquire to the VTF OIC.

Next we need some information about your pet. Please fill out the requested information on the back of this page.

Pet Information

Name:	Dog / Cat / Other	Gender: Male or Female
Breed:	Color:	Birthday / Age:

Is your pet spayed/neutered (fixed)? Yes / No

Microchipped? Yes / No

Is your pet on flea and/or heartworm prevention? Yes / No

Is your pet on any medication? Yes / No

If yes, please write the name: _____

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If yes, please write the name: _____

Please let us know if you need more space.



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MEMORANDUM FOR RECORD

SUBJECT: Ft Bliss VTF No Show Policy

1. In an effort to maximize the time veterinarians and technicians spend with your pets and minimize your wait time, we have made the following changes to our No-Show and Late Arrival Policies:

NO-SHOW POLICY

Effective 1 February 2015, the Ft. Bliss VTF implemented a “No-Show” policy which will affect clients who fail to keep their scheduled appointments or who fail to cancel their scheduled appointment within twenty-four hours of the scheduled time. Each individual appointment for each pet missed will count as a “No-Show”.

- First Occurrence - Owner/Patient will receive a phone call emphasizing our policy.
- Second Occurrence - Owner/Patient will receive a second notification, 1SG or Commander will be contacted, and future appointments will be scheduled with the NCOIC at their discretion.
- Third Occurrence – Will result in a twelve month suspension from Veterinary Services including over the counter sales.

LATE ARRIVAL POLICY

Patients arriving more than ten minutes late for a scheduled appointment may result in the rescheduling of the appointment for another day and the appointment considered as a No-Show, at discretion of NCOIC or OIC.

2. The Point of Contact for this memorandum is SFC Laura Viccari at (915) 742-2167 or laura.a.viccari.mil@mail.mil.

X

Client's Signature

DANIEL J. BLAND
CPT, VC
Ft. Bliss VTF OIC