**Client introduction and deposit payment form**

All information is strictly private and confidential, this form is to give me an idea of your pet’s problem, how quickly you would like to be seen along with your expectations and time consideration

|  |  |
| --- | --- |
| Name |  |
| Email |  |
| Address |  |
| Contact number |  |
| Pets name |  |
| Age |  |
| Gender |  |
| Species and breed |  |
| How did you find me |  |
| Which vet practice do you use |  |
| Problem behaviour |   |
| How would you like your pet to behave/ expectations |  |
| How quickly do you need an appointment | within 3 days [ ] within 1 week [ ] within 2 weeks [ ] within 4 weeks [ ]  |
| How long has behaviour been present |  |
| What have you tried to change the behaviour |  |
| How much time do you have every day to help change your pet’s behaviour | 15 mins [ ] 20mins [ ] 30mins [ ] 45mins [ ] 1 hour [ ] over 1 hour[ ]  |
| Do you have a timeframe for changing your pet’s behaviour |  |
| Do you have any limitations to changing your pet’s behaviour, e.g. mobility issues, shift worker |  |

A deposit of £50 is required with the submission of this form please, payable to:

Miss C R Francis. Sort Code: 09-01-28. Account: 65132554.

The full balance is then payable prior to your appointment.