



Health Consultation Intake Form - Cats

Contact Information

Date: _____

Name: _____

Address: _____

_____ Postal Code/ZIP

Phone: Home _____ Cell _____

Email Address: _____

Would you like to receive our newsletters for health information, tips and health news?
Please circle which newsletters you would like to receive.

Horses

Dogs-Cats

People

Billing Information (OMIT if fees have been paid on line)

Visa/MC #: _____

Expiry: _____ 3 Digit Security #: _____

Signature: _____

(Note: Signature permits us to charge the above credit card for the consultation fee and any other charges as authorized by the customer.)

Health Information

Name of Cat: _____ Male/Female _____

Breed: _____ Age _____

1) How long have you owned your cat? _____

2) Where does your cat spend the most time, indoors and outdoors?

3) List current health problems:

4) What health problems occurred in the past - including accidents and surgeries?

5) What type of food is your cat currently eating?
Attach an ingredient list.

6) Please list all medications and/or supplements:
Attach an ingredient list for combination supplements.

7) Please list the vaccination history if known:

8) What other holistic therapies has your cat been treated with?

9) What other information is relevant to your cat's health including behaviour or emotions.

Email two pictures of your cat: one full body and one portrait.

Disclaimer

This consultation is intended to provide health information and Darla Marie Cameron and Riva's Remedies Ltd. reminds clients that this information is not intended to be used as a diagnosis or to treat specific health problems or diseases for their animals. The information should not be considered as a substitute for qualified veterinary advice. In the holistic health care model, our aim is to support wellness of the whole body.

We also provide information on products, but it is the client's responsibility to ensure that any products used are appropriate and that there are no contraindications for their specific situation.

Darla Marie Cameron and Riva's Remedies Ltd. and their owners, employees or affiliates will not be liable or responsible for any loss, damage or health problems caused directly or indirectly by the use or attempted use of any of the information or products. People should always seek the services of a qualified health care professional.

Signature

Date

Riva's Remedies

#4 - 1390 Pleasant Valley Road
Spallumcheen, B.C. V0E 1B2

Phone: 250-546-0669

Fax: 250-546-0663

Email: connect@marijke.com

www.rivasremedies.com