

Client/Animal Questionnaire

Your Name: _____

Street Address: _____ City/State/Zip: _____

Phone: _____ Cell: _____ Email: _____

Horse/Pet Name: _____ Age: _____ Breed: _____ Sex: _____

Major Complaint(s): _____

Please list past injuries or illnesses: _____

Personality, i.e., friendly, affectionate, confident, alpha, laid back, careful, fearful, grumpy, worrier:

Diet: _____

Please check all that apply:

ligament/tendon problems hoof/nail problems sore/weak back

muscle stiffness neck stiffness hock issues knee issues

stifle problems shoulder pain back pain/"cold" back trouble sweating

allergies arthritis "girthy" prone to colic/digestive problems

picky eater tends to "stock up"/edema chronic eye problems

Acupressure is not a replacement for veterinary care and an animal acupressure practitioner cannot diagnose or treat illnesses.