

**Regional Veterinary Service**

2269 13000 Rd.  
Oswego, KS 67356  
(620) 795-3099

**Client Information Update Form**

Client Name \_\_\_\_\_

Client Address \_\_\_\_\_

Current Phone Number(s) \_\_\_\_\_

Cell Phone Number(s) \_\_\_\_\_

e-mail address \_\_\_\_\_

I would prefer to receive reminders by \_\_\_\_\_ e-mail \_\_\_\_\_ mail

Current Pets Names \_\_\_\_\_

Thank You for taking the time to help us update our records.