



Clarington
Animal
Hospital

Request An Appointment Form

Please Note: This is only a form to request an appointment, not to book an appointment. A member of our staff will contact you to confirm your pet's scheduled appointment.

If there is an urgent health concern, do not request an appointment online and call our practice immediately. For after hours emergencies, call an emergency veterinary hospital.

Desired Appointment Date: _____ **Select a Time:** Morning Afternoon Evening

Preferred Vet: First Available Dr. Carol Cameron Dr. Jackie Bosak Dr. Christine Nawas

Your First Name: _____ **Your Last Name:** _____ **Phone:** _____

Email Address: _____ **How should we contact you?:** Phone Email

Your Pet's Name: _____ **Type of Pet:** Dog Cat Other

If other, please specify: _____

Reason For Your Appointment:
