

Run! Day Camp For Dogs, LLC

Day camp application

Dog information (Please print)

Today's date: _____

Dog's name: _____ Date of birth: _____

Breed: _____ Age: _____ Weight: _____

Owner(s) information

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work: _____ Cell: _____

Alternate contact phone _____

E-mail
address(es): _____

Emergency contact: _____

Health Information

Today's date: _____

Name of dog(s): _____

Spayed/neutered(Y/N): _____

Signature of owner: _____

Clinic name: _____ I.D. # _____

Clinic address: _____

Phone: _____ License County: _____

Dog your dog have a microchip? _____

(Vaccination expiration dates):

Bordatella: (Date) _____

DHLP: (Date) _____

Rabies: (Date) _____

General information:

How did you hear about Run! Day Camp for Dogs? _____

Dogs name: _____ Date of birth: _____

Breed: _____ Sex: _____ Age: _____

How long have you had your dog? _____

Where did you get your dog? _____

If adopted, do you have knowledge of your dog's past history? _____

Does your dog like children? _____

Describe how your dog behaves around children: _____

List other animals in your household: _____

Describe how your dog gets along with the other animals in the household: _____

Health and Grooming

Does your dog have fleas? _____

Does your dog have hip dysplasia? _____ If yes, any restrictions on your dog's activities or movements? _____

Does your dog have any allergies or sensitivities? Please list: _____

What brand of dog food do you use? _____

How often do you feed your pet? _____

List any current medical problems: _____

List any chronic medical problems: _____

List any medications your dog currently takes: _____

Does your dog have any sensitive areas in his/her body? _____

What are your dog's favorite petting spots? _____

Does your dog wear his/her collar in the house? _____

If you take your dog's collar off in the house, where do you usually leave it? _____

Do visitors bring their dogs to your home? _____

If yes, how does your dog react? _____

How does your dog react to a stranger coming into your home? _____

Are there any kinds of people your dog automatically fears of dislikes? _____

Are there any kinds of animals your dog automatically fears of dislikes? _____

How does your dog react to being left home alone? _____

How does your dog react to other dogs approaching while your on a walk? _____

Describe your dog's typical exercise routine: _____

Has your dog ever bitten anyone? _____

What were the circumstances? _____

Does your dog respond to basic commands? _____

Are there any different words you use for the basic commands (such as "here" instead of "come")? _____

Has your dog ever run away? _____

What were the circumstances? _____

Is your dog frightened by any noises? _____

Is your dog frightened or nervous around anything else? _____

Does your dog like to ride in the car? _____

Has your dog ever snapped or growled at anyone taking food or toys away? _____

Does your dog play with other dogs? _____

What kind of games does your dog play with other dogs? _____

Has your dog ever humped another dog while playing? _____

What do you do if your dog humps another dog? _____

Has your dog had any formal obedience training? _____

Emergency release

In the event of a medical emergency, I authorize my dog(s) to receive treatment from NW Vet Clinic. In the event that NW Vet Clinic is closed, I authorize treatment at Dove Lewis Emergency Veterinary Clinic. I agree that I am financially responsible to pay for the services my dog(s) receive.

Name of Dog(s): _____

Signature of owner: _____

Date: _____

Emergency contact: _____