

Camp Canine
Camper Information Sheet

Date: _____

Human's Information

Name: _____

Address: _____ City: _____ Zip _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Would you like to receive email updates on Camp Canine activities, coupons, etc? _____

Alternate Emergency Contact (if you are on vacation or cannot be reached):

Alternate Contact Name: _____

Home Phone: _____ Mobile Phone: _____

Vet's Name: _____ City: _____

Vet's Phone Number: _____

Dog's Profile:

City Dogs is Licensed in: _____ Is your dog FIXED? _____

Name: _____ Color _____ Sex: _____

Breed: _____ Dogs Age: _____ Birthday: _____

Is your dog house trained: _____ Is your dog crate trained _____ Allergies _____

Are treats allowed _____ Any past injuries we should know about _____

Will we be giving medications _____ How Much/When _____

Has your dog ever shown aggression towards other dogs? _____ Humans? _____

Has your dog ever bitten another dog? _____ Human? _____

Is your dog frightened by anything _____ Jumps Fences? _____

How often does you dog play with other dogs _____ Breed _____

Camp Canine Owners Agreement

I understand and agree that admitting my dog(s) to Camp Canine, their staff has relied on my representations that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or other dog.

I further understand and agree that Camp Canine staff and volunteers will not be liable for any problems that develop regarding my dog(s). I hereby release Camp Canine, its employees, agents, volunteers from any liability of any kind whatsoever arising from my dog(s) attendance, care and participation at Camp Canine or in connection with any casualty occurring to my dog(s) or any person, including me.

I understand that during normal dog play there is a slight chance that my dog may get scratches, punctures or more. I further understand and agree that any problems that develop with my dog(s) will be treated as deemed best by staff and volunteers of Camp Canine in their sole discretion, and I assume full financial responsibility for any and all expenses involved including veterinary expenses.

I am solely responsible for any harmed caused by my dog(s) while my dog(s) is/are attending Camp Canine. In addition, I further agree that I am solely responsible for any and all acts or behavior of my dog(s) while in the care of Camp Canine.

I agree that I will pick up my dog or a pre-approved agent by closing or scheduled time or I will be charged additional fees after 6:30 PM or my scheduled time if my dog is not picked up.

I agree that my dog(s) may be video taped, photographed and recorded. Camp Canine shall be the exclusive owner to the results and all proceeds of such tapings, photographs and recordings within the rights, throughout the world and unlimited number of times in perpetuity, to copyright, to use and to license to others in any manner. I further agree that my dog(s) may be used in any and all media and in the promotion, advertising, sale, publicizing and exploitation of Camp Canine.

I certify I have read, agree and understand the policies set fourth above and that I have read and understand this agreement. I agree to abide by the rules and regulations and accept all terms, conditions and statements of this agreement.

Signature of Owner _____ Date _____

Name of Dog(s) _____

Health and Temperament Certification

I, _____ hereby certify that my dog(s) _____

is/are in good health and have not been ill with any communicable condition in the past 30 days.

I further certify that my dog(s) have never harmed or shown aggressive or threatening behavior towards any person or any other dog and that my dog(s) is/are current on the following vaccinations: distemper, Parvo, Bordetella and Rabies. I also agree to maintain vaccinations and to keep Camp Canine apprised on any updates, changes, etc.

Signature of Owner: _____ Date: _____