



Registration

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Please Print Clearly!

Dog's Name: Last _____ First _____

Breed or Mix _____ Male _____ Female _____ Age _____

Is this dog spayed/neutered? Yes? _____ No? _____

Date of birth (approx. if not sure) _____

Colouring _____

Distinguishing Physical Characteristics _____

Any permanent Identification yes ___ no ___ chip# _____ tattoo _____

Do you have Health Insurance for this dog? Yes _____ No _____

If yes, name of insurer _____

Policy# _____

Veterinarian's Name _____ Clinic _____

Address _____

Phone# _____ fax# _____

Do you have an emergency veterinary clinic? Yes _____ No _____

Emergency Vet's name _____

Address _____

Tel# _____ Fax _____

Please ensure that your dog is up to date on the following vaccinations:

(* = required)

We also require a copy of the vet's certificate of vaccinations

Rabies* _____ Distemper* _____ Hepatitis* _____

Kennel Cough* (Tracheobronchitis) note: twice yearly for multiple boarding and 30 days in advance of boarding) _____ Date? _____

Leptospirosis _____ Giardiasis _____ Coronavirus _____

External parasite prevention is required for fleas & ticks (flea collars are not acceptable). Which do you use?

Advantage _____ Frontline _____ Biospot _____ Revolution _____

Other _____ What kind? _____



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Is this dog on any medications, vitamins, supplements, etc? Yes ___ No ___

If YES, details _____

Does this dog have any allergies? Yes ___ No _____

Describe _____

Has this dog been checked for intestinal parasites (i.e. fecal) yes ___ no ___

Is this dog on Heartworm Prevention? Yes ___ No ___ what type ?

Revolution ___ Sentinel ___ Heartguard ___ Proheart ___ Interceptor ___

Has the dog had a heartworm test in the last 12 months? Yes ___ No ___

***External and Internal Parasite as well as Heartworm testing and appropriate prevention is required. Confirmation should be provided on the Veterinarian's Certificate**

In order to prevent stomach upset, you are to bring a sufficient amount of your dog's usual food for your dog's stay.

What brand of food do you feed this dog? _____

Is the food: Dry ___ Canned _____ both _____

How much do you feed this dog? _____

How often? _____

Should your dog refuse to eat the first day or two, is he allowed any 'people food' to be mixed into his regular food such as bacon fat or cheese?

Yes _____ No _____

Does this dog get along with people? Yes ___ No _____

Any people phobias? Yes ___ No _____ Type of phobia _____

Does this dog get along with other dogs? Yes _____ No _____

If no, types of dogs or reasons ? _____

Will this dog generally come when called? Yes _____ No _____

Does this dog have any phobias/idiosyncrasies (thunderstorms, needs to be kissed on the head before eating, etc) yes ___ no ___ Describe _____



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Owners Name: Last _____ First _____
Address: _____ Apt# _____
City: _____ Prov: _____ Postal Code: _____

Home Phone# _____
Work Phone# _____ ext _____
Cell # _____ Fax# _____
Email address: _____

EMERGENCY CONTACT

Name: _____
Phone# _____ work# _____
Any alternate names or numbers? _____

Contact information while you're away?

How did you hear of Camp LotsaDogs? _____

The management and staff of Camp LotsaDogs are dog lovers who endeavour to create a positive, friendly, safe and enjoyable experience for all dogs in their care.

Camp LotsaDogs undertakes to use reasonable efforts to ensure the safety, security and well being of all the dogs entrusted to its care.

Please read and sign the following waiver. This completes the application process.
Thank you.
