

ADDITIONAL CAMPER INFORMATION:

Camper's Name _____ Breed _____

Color/Description _____

Age _____ Weight _____ Gender _____ Spayed/Neutered _____

Veterinarian/Clinic _____

How does your dog react to : other adult dogs? _____

puppies or small dogs? _____

strangers? _____

children? _____

Has your dog ever been to: a dog park? _____

another doggie daycare? _____

a boarding facility? _____

a groomer? _____

Has your dog ever bitten: another dog? _____

a person? _____

If yes please explain the circumstances: _____

Does your dog: dig? _____

climb or jump fences? _____

show food or toy aggression? _____

Is your dog: housebroken? _____

crate trained? _____

frightened in certain situations? _____

currently on a flea and heartworm preventative? _____

leashed trained? _____

Does your dog: have any medical conditions? _____

take any medications? _____

have any allergies? _____

