



Your Name: _____

Dog Name(s): _____

VETERINARIAN'S REPORT

In order to insure the health of all our dogs while at camp, please provide the following records upon your arrival, at check-in.

Dogs may not participate in our program unless verifiable proof of the listed required vaccinations (or titres) -and- proof of a negative fecal sample are provided.

Please contact us with any questions you might have. Discuss any medical

REQUIRED VACCINATIONS / WE ACCEPT TITRES FOR THOSE WHO VACCINATE LESS FREQUENTLY.

Either bring a copy of current and recent vet records or have your vet sign this section:

1. RABIES Vaccination Date: _____ Rabies Vaccination Expiration: _____
2. DISTEMPER Vaccination Date: _____ Distemper Vaccination Expiration: _____
3. PARVO (parvo-virus) Vaccination Date: _____ Parvo Vaccination Expiration: _____

Signature of Licensed Veterinarian: _____ Date: _____

Veterinarian's Name and Office Phone Number: _____

If you have any reason to question the need for any vaccination for your dog, please contact your own vet and/or the Camp Dogwood office.

NEGATIVE FECAL SAMPLE

A fecal sample must be completed within 45 days of your camp session. Results should be indicated below:

Fecal Sample Testing Date: _____ Test Results: _____ Positive _____ Negative

Signature of Licensed Veterinarian: _____ Date: _____

VACCINATION SUGGESTION... ALTHOUGH NOT REQUIRED TO ATTEND CAMP!

Given the number of dogs which will be at this camp, Camp Dogwood also strongly recommend the *Bordatella (Kennel Cough) Vaccination*.

FLEA & TICK PREVENTION... PLEASE MAKE SURE YOUR DOG ARRIVES AT CAMP FLEA-FREE!

Given the fact that you will be outdoors and in/near wooded areas, we also strongly recommend that **PRIOR** to arriving at camp you treat your dog(s) with some form of flea and/or tick prevention (ie. Frontline).

ANY OTHER MEDICAL CONDITIONS?

If your dog has any other medical condition you feel would be important for us to know, please describe it in the space below:

Official Vet Address Stamp