

Camp Dog Works Visitation Form
If You Must Leave Them, Leave Them with Us!

Dog Name	<input type="text"/>	Check In Date & Time:	<input type="text"/>
		Check Out Date & Time:	<input type="text"/>

Times fed per day:	Amount each meal:	EXACT BRAND OF FOOD:	MEDICATION
<input type="text"/>	<input type="text"/>	<input type="text"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

Breed/type: Age: Neutered? YES NO

Owner: Home #: Cell #:

Address: Email:

Veterinarian / phone: Pick up person:

Contact Person / phone:

- I understand play puts my dog at greater risk. I have seen the kennel set up.
- Yes, my dog **CAN PLAY** with moderate supervision if you have suitable playmate. (free)
- No, **CANNOT PLAY** My pet can only go **out by himself** with moderate supervision. (free)

-
- My pet can play only with total supervision. \$5 per play. Number of plays a day?
 - Special needs dog.** *Someone with him when he is out by himself.* \$10 per day
 - Special drop off or pick up time \$10 (*see hours*) T.V. time on couch at night. \$10
 - Bath \$15, \$25, \$30, \$40 small, medium, large, extra large. nails \$5 - \$20 depending on dog
 - Digital portrait, 3 or more good shots, one B&W, high res on cd. \$30 20 min. farm walk \$15

Medication Instructions:

Items left with dog:

Other info for this visit:

Behaviors we should watch:
Bolting, climbing, fear when handled, dog aggressive, coprophagia etc?

Please fill in with computer. Save, Update, Print, and Bring for each visit. Form can be sent to us as an email attachment. If you do not have this form, you will be asked to fill one out before leaving check in. **Shot Record** and **Kennel Contract** comes once, first visit in calendar year.