



## Camper's Profile

Owner's Name: \_\_\_\_\_ Dog: \_\_\_\_\_

Does your dog have any food restrictions? YES NO  
 If so, please list: \_\_\_\_\_

Are there any pre-existing conditions our facility should be aware of? YES NO  
 If so, please advise: \_\_\_\_\_

Is your dog on any medications? YES NO  
 If so, please list: \_\_\_\_\_  
 Describe the condition treated by the medication(s). Use reverse side if necessary.

Does your dog have hip dysplasia or arthritis? YES NO  
 If yes, note restrictions that need to be placed on your dog's activities or movements.  
 \_\_\_\_\_

Does your dog have any sensitive areas? YES NO  
 If yes, please explain: \_\_\_\_\_

Does your dog have allergies? YES NO  
 If yes, please explain: \_\_\_\_\_

Has your dog ever growled at someone? YES NO  
 If yes, explain the circumstances: \_\_\_\_\_

Is your dog micro-chipped? YES NO

Does your dog have issues in any of the following areas? If yes, please explain:

		Explain:	
Mouthiness	Yes		No
Barking	Yes		No
Jumping on people/dogs	Yes		No
Jumping over fences	Yes		No
Getting under fences	Yes		No
Escaping enclosures	Yes		No
Mounting	Yes		No
People/dog aggression	Yes		No
Being crated	Yes		No

Does your dog play well with other dogs? YES NO  
 If no, please explain: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_