



Camper Profile

Owner's Name: _____

Dog: _____

Is your dog micro-chipped? YES NO

Does your dog have any food restrictions? YES NO

If so, please list: _____

Are there any pre-existing conditions we should be aware of? YES NO

If so, please advise: _____

Is your dog on any medications? YES NO

If so, please list medications and what conditions are being treated: _____

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: _____

Does your dog play well with other dogs? YES NO

If no, please explain: _____

Owner's Signature: _____

Date: _____