

Does your dog have any known medical conditions? (food allergies, seizure	s, etc.) { } YES { } NO
If YES, please explain	OTTAMBOLET TENET
Has your dog had any recent surgeries, injuries, or illnesses we should be aw	vare of? { } YES { } NO
If YES, please explain	wmer's Name:
	lome Address:
ASSESSMENT	in. State. Zip code:
Briefly describe your dogs personality	and phonoments.
Has your dog attended a doggy daycare, play group, or dog park? { }YES Please explain your dogs behavior while playing with other dogs	{ } NO
Is your dog possessive of toys: { } YES { } NO Is your dog possessive of What words/commands does your dog know? (examples: sit down, off, come	PET INFORMALI
What is your dogs favorite toy or type of toy? (balls, stuffed toys, tug toys)	Pet's Name Breed Color's testings
GENERAL INFORMATION	Age/Birdfdate Sex
Hours of Operation: Furry Tail Shack Dogov Day camp is open Manday Enid	7:00am 6:00nm

camp is open Monday-Friday from

Rates: Full day- Up to 11 hours \$35.00 (Additional dog from same household \$25.00) Half day- Up to 5 hours \$25.00 (Additional dog from same household \$18.00)

All dogs must be at least 1 year of age or older. Size range: 20lbs-65lbs.

Spay/Neuter: All dogs 7 months or older must be spayed or neutered.

Shots: All dogs must have up to date vaccinations. Owners must submit proof of Bordetella, Rabies, DHLPP distemper, hepatitis, leptospirosis, parainfluenza, parvovirus vaccines. Your dog must also be on a flea and tick medication and have had a negative fecal test in the past year. (Test for giardia and parasites.)