



Dear Dog Owner:

Thank you for choosing Camp Wagging Tails. Please complete the following forms for your camper(s):

- Statement of Authorization
- Owner Agreement
- Emergency Contact Form
- Pet Personality Profile

Please fill out a Personality Profile for each pet; however, you only have to list all names on the other three forms.

Please bring these forms with you to your evaluation (appointment required) or return them to Camp Wagging Tails, 10835 Bailey Road, Cornelius, NC 28031, scan and e-mail to info@campwaggingtails.com, or fax to 704-895-8172.

If you have any questions, please feel free to contact us at 704-895-8444 or stop by Camp Wagging Tails to visit our facility.

We look forward to meeting you and your camper.

Mary and Richard Colven
Owners

Camp Wagging Tails NG, Inc.
Statement of Authorization

I/We _____ by signing this “Statement of Authorization”, are authorizing my/our Veterinarian to provide any information necessary for proper care of: _____ in my/our absence.

Signed: _____

Name: _____

Date: _____

Camp Wagging Tails NG, Inc.

Owner Agreement

I, _____, hereby certify that my dog(s)/cat (s)

_____ is/are in good health, on monthly flea prevention (12 months a year) and have not been ill with any communicable condition in the last 30 days. I further certify that my dog(s) have not harmed or shown aggressive or threatening behavior towards any person or any other dog. I have read and understood the following:

- ___ 1. I understand that I am solely responsible for any harm or damage caused by my dog(s) to persons or property of the Owners, employees, licensees, invitees of Camp Wagging Tails, or any other pets housed or visiting Camp Wagging Tails while my dog(s) is/are attending Camp Wagging Tails Day and Overnight Camp.
- ___ 2. I further understand and agree that in admitting my dog(s) to the camp, Camp Wagging Tails' staff have relied on my representation that my dog(s) is/are in good health and have not harmed or shown aggressive or threatening behavior towards any person or any other dog.
- ___ 3. I further understand and agree that Camp Wagging Tails LLC, and their staff and volunteers, will not be liable for any problems which develop, provided reasonable care and precautions are followed, and I hereby release and discharge them of any and all damages, liability and/or causes of action of any kind of accident, damage or injury whatsoever arising from my dog(s) attendance and participation at the camp.
- ___ 4. I further understand, consent and agree that any problem or injury that develops with my dog(s) while under the control of Camp Wagging Tails will be treated by my own vet. In the event my own vet is not available or too far away, I agree to let the vets and staff at North Mecklenburg Animal Hospital, Lake Cross Veterinary or Carolina Veterinary Specialists (Animal Emergency Hospital) treat my dog or cat. I agree to assume full financial responsibility for any and all expenses involved in such treatment.
- ___ 5. I recognize that there are inherent risks of illness or injury when dealing with animals. Such risks include, but are not limited to, problems resulting from rough play and canine cough (doggie colds).
- ___ 6. I am aware that my dog will co-mingle with dogs owned by different owners while staying at Camp Wagging Tails.
- ___ **7. *I have initialed each statement above to acknowledge my understanding and acceptance:**

I certify that I have read, understood and agree with the policies of the Camp as set forth on the preceding pages and that I have read, understood and agree with the conditions and statements of this agreement.

Signature of Owner: _____ Date: _____

Name of Owner: (Print) _____

Camp Wagging Tails Emergency Contact Information

Owner Information:

Name: _____

Address: _____

E-Mail: _____

Phones: Home: _____ Work: _____

Cell: _____ Cell(2): _____

Emergency Contact: Must be someone living locally but not with you.

Name: _____

Phones: Home: _____ Work: _____

Cell: _____

How did you hear about us?

Newspaper Ad: _____ Friend: _____ Drive By: _____ Vet Referral: _____

Chamber of Commerce: _____ DogPark: _____ Other: _____

Pet(s) Information:

Name(s): _____

Breed(s): _____

Sex(s): _____ Birthdate(s): _____ Weight(s): _____

Veterinarian:

Name: _____

Address: _____

Phone: _____

Camper Personality Profile

please complete 1 form per dog

Basic Information	
Owner's Name:	Date:
Phone #:	Email:
Dog's Name:	Date Acquired:
Dog's Breed (if a mix, list the predominant breed's behavior)	Current Age: Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Where did you get your dog? <input type="checkbox"/> Breeder <input type="checkbox"/> Animal Shelter <input type="checkbox"/> Animal Rescue Group <input type="checkbox"/> Other: If adopted, what knowledge do you have of your dog's history?	
Has your dog ever interacted with other dogs in an Off-Leash play environment? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Describe the current energy level of your dog: <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High	
Why are you interested in our Off-Leash play environment for you dog? (check all that apply) <input type="checkbox"/> Play with other dogs <input type="checkbox"/> Exercise <input type="checkbox"/> So he/she is not home alone; (check if <input type="checkbox"/> separation anxiety) <input type="checkbox"/> Recommended by Vet/Trainer/Other – reason:	

Dog-Dog Socialization
Which best describes your dog's level of socialization with other dogs: <input type="checkbox"/> Extensive – Regular visits to dog social events, off-leash dog parks, dog daycare, etc <input type="checkbox"/> Moderate - Some off-leash play occasionally with neighbor's/visitor's/friend's dog <input type="checkbox"/> Minimal - On leash encounters only
Would you say your dog warms up to new dogs: <input type="checkbox"/> quickly <input type="checkbox"/> slowly upon first meeting <input type="checkbox"/> over many meetings <input type="checkbox"/> never
Would you say that your dog is most comfortable: <input type="checkbox"/> touching and interacting with other dogs <input type="checkbox"/> being near but not interacting with other dogs <input type="checkbox"/> staying at a distance from other dogs
What does your dog do when he: - meets a new dog for the first time? - sees another dog while he's on leash? - is behind a fence or looking through a window (home or car) and sees another dog?
Has your dog ever - chased <input type="checkbox"/> another dog, or <input type="checkbox"/> animal? <input type="checkbox"/> No <input type="checkbox"/> Yes; please describe: - had a confrontation or issue with another dog? <input type="checkbox"/> No <input type="checkbox"/> Yes; please describe: - bitten another dog (or other animal)? <input type="checkbox"/> No <input type="checkbox"/> Yes; please describe : - been turned down or dismissed from an Off-Leash play environment? <input type="checkbox"/> No <input type="checkbox"/> Yes; please describe :

Dog Play & Obedience

What kind of dog does your dog prefer to play with?

- Big dogs Small dogs Mid-size dogs
 Older dogs Younger dogs
 Rowdy/ energetic dogs Laid back dogs Other:

Are there any kinds of dogs your dog dislikes or prefers not to play with?

- Big dogs Small dogs Mid-size dogs
 Older dogs Younger dogs Puppies
 Rowdy/ energetic dogs Laid back dogs Other:

Which commands does your dog know? (please check all that apply)

- Name recall Sit Stay Down Come Off Heel Shake Rollover
 Other

How often do you practice / use obedience commands at home?

- Daily – key part of communication Use on walks or when have visitors Occasionally
 Rarely

Dog- Human Socialization

Would you say that your dog warms up to new people: immediately quickly over time

Does your dog have a fear/dislike of certain human characteristics (check all that apply)

- Men Women Children
 Hats Eyeglasses /Sunglasses Facial Hair
 Other – please describe to us:

Is your dog comfortable:

- Having her collar put on and taken off? Loves it Tolerates it Hates it
How can you tell?
Having her leash put on and taken off? Loves it Tolerates it Hates it
How can you tell?
Being picked up, petted, and hugged? Loves it Tolerates it Hates it
How can you tell?

How does your dog react when:

- A person reaches for something he/she has (food bowl, toy, etc)? Tolerates it Hates it
How can you tell?
A person approaches while he/she is resting? Tolerates it Hates it
How can you tell?

Has your dog ever growled snapped at or bitten a person?

- No
 Yes

Did the incident(s) involve:

- male female child aged:
 toys or other objects food space (such as a favorite couch, bed, sleeping spot)
 being approached being reached for or picked up being petted on:

Tell us what happened:

Dog Health

Please list monthly flea/tick control and heart medication:

Does your dog have:

Allergies No Yes, please explain:

Any medical conditions No Yes; please explain:

Any physical disabilities No Yes; please explain and indicate any specific instructions or restrictions

Has your dog ever had a seizure? No Yes; please explain

Is your dog on any type of behavior modification/anxiety medications:

No

Yes, but not all the time (ie, anxiety re thunderstorms or separation)

Yes, regularly (takes on a daily basis to calm or modify behavior)

If YES for either box, please list medications and explain circumstances:

Dog Home Environment

How much exercise does your dog get at home?

What kind of collar / leash do you use to walk your dog?

Where does your dog sleep at night?

Crate dog bed on the floor in bed with family member free run of the home

What do you do with your dog when you are not at home during the day?

Crate confine to area in house doggie door in/out free run of the home

Has your dog exhibited any of the following (please check all that apply):

Climbing/jumping a fence digging destroys and swallows toys chews/eats leash

dashes out the front door excessive barking separation anxiety and shows it by:

Are there other pets in the home? Please list breed, age, gender.

Are there children in the home? Please list breed, age, gender – JUST KIDDING about the “breed” thing.

However, we would like to know if there are younger babies, toddlers, children or teenagers so we have a sense of what the dog may be experiencing at home.

Any Other Information you would like to share....