



Camp Cypress Dog Retreat

Client Information Form

CONTACT INFORMATION		FOR CCDR USE ONLY	
Owner Name:		Client #:	
Address:			
City, State Zip:			
Home Phone:			
Mobile Phone:		Can we text this number?	Y N
Email:			

Alternate Contact:			
Address:			
City, State Zip:			
Home Phone:			
Mobile Phone		Can we text this number?	Y N
Is Alternate Contact allowed to pick up this pet?		Y	N
If yes, on what conditions?			

VET INFORMATION	
Name:	
Clinic Name:	
Address:	
City, State Zip:	
Phone:	

CREDIT CARD INFORMATION (OPTIONAL)	
Credit Card #	
Name on Card:	
Expiration Date:	

How did you hear about us?



Camp Cypress Dog Retreat

Customer Agreement

Camp Cypress Dog Retreat agrees to exercise due diligence on the care of my dog. Should my dog become ill or require any kind of medical attention, Camp Cypress Dog Retreat reserves the right to administer any and all necessary care and/or to use any available veterinarian. I agree to pay any expenses so incurred in addition to fees incurred for services, including transportation to/from veterinarian, provided by Camp Cypress Dog Retreat.

Camp Cypress Dog Retreat agrees to keep its premises sanitary and properly enclosed. My dog will be cared for by Camp Cypress Dog Retreat staff only, without liability on Camp Cypress Dog Retreat's part for loss or damage from disease, theft, fire, death, escape, injury or harm to persons, other dogs or property by my dog, or from other unavoidable causes, due diligence and care having been exercised by Camp Cypress Dog Retreat.

I agree that my dog is in good general health, and have provided valid proof that he/she is currently spayed or neutered (if over 6 months of age), and has been vaccinated against (current vaccination records must be on file with CCDC at least 3 days **BEFORE** date of drop off):

Rabies within 1 year

DHLPV or DAP within 3 years

Bordetella within the last 6 months and **at least 2 weeks** prior to boarding

Leptospirosis vaccine recommended but not required

In addition, I agree that my dog is on one of the flea/tick prevention products accepted by Camp Cypress Dog Retreat. Any dogs arriving with fleas and/or ticks will be bathed and administered flea/tick prevention at my expense.

I also agree that on any dogs having a coat which requires grooming, to be determined by Camp Cypress Dog Retreat, that the dog arrive in a groomed condition, or be subject to additional grooming cost at the owner's expense upon arrival.

I agree to provide Camp Cypress Dog Retreat with my dog's regular food in sufficient quantity, packed into individual portions. If I choose to have Camp Cypress Provide food for my dog, I agree to pay an additional \$5.00 per day for this service.

Should my dog exhibit aggressive behavior toward other dogs or people, for the safety of all concerned he or she will be separated into a secure area for the duration of his or her stay, and may be asked not to return upon pickup by the owner.

I agree that my dog may be photographed, videotaped, and/or recorded. Camp Cypress Dog Retreat shall have exclusive rights to the results of any such material, and material obtained through such means shall only be used by Camp Cypress Dog Retreat for its own promotion, advertising, sale, or publicizing.

I agree that should I not pick up my dog at the agreed upon date/time, I may be subject to additional boarding cost at a rate to be determined by Camp Cypress Dog Retreat, and I am responsible for any such additional costs.

I understand that Camp Cypress Dog Retreat requires advance notice of cancellation as follows:

24 hours for non-holiday reservation; 72 hours for holiday reservation

I agree to pay \$50.00 or half the amount of the scheduled visit, whichever is less, if I do not cancel in accordance with this cancellation policy.

My signature indicates that I have read and understand the policies and requirements.

Owner's Signature _____

Pet name(s) _____



Camp Cypress Dog Retreat

Pet Information Form

PET INFORMATION – PLEASE FILL OUT ONE FORM FOR EACH DOG		FOR CCDR USE ONLY
Owner Name:		Client #:

BASIC INFORMATION			
Dog Name:		Breed:	
Color/Markings:			
Sex:	Date of Birth:	Weight:	Microchip?
How old was your dog when you got him/her?			
Where did you get your dog?			
What was the primary reason for getting your dog? (Circle all that apply.)			
Companion	Protection	For Breeding	For a child
Companion for another dog	To Replace Previous Dog	Other (please list)	

HEALTH INFORMATION			
General Health:		Spayed/Neutered?	Y N
Ever had a seizure?	Y N	Kennel Cough?	Y N
Any Allergies	Y N	Asthma/Wheezing?	Y N
Any known medical conditions? Y N If yes, explain:			
Is your dog currently on any special medication? Y N If yes, please complete Special Food/Medication Form			
On Flea/Tick Prevention: Y N What type:		Date of Last Dose:	
Heartworm/Parasite Prevention? Y N What type:		Date of Last Dose:	
Vaccinations Current?	Y N	Proof of Vaccinations Attached?	Y N
Proof of Annual Rabies shot, DHLPP within 3 years and Bordetella within 6 months but at least 2 weeks prior to boarding is required.			

GROOMING	
Has your dog ever been groomed?	Y N
If yes, has the groomer given you any feedback on your dog?	



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Owner Name:		Client #:
EXERCISE		
Does your dog go on walks with you?	Y N	If yes, how often?
Does your dog know how to walk on a leash?	Y N	Do you walk your dog on a retractable leash? Y N
Do you allow your dog to walk in front of you?	Y N	Does your dog know how to heel next to you? Y N
How far can your dog walk (in distance or minutes) before tiring?		
Does your dog like to fetch? Y N		
Does your dog enjoy any other physical activity?		
TEMPERAMENT		
Please circle which of the following best describes your dog:		
Never runs out of energy	Happy and average energy	Low key and mellow
Shy and withdrawn	Nervous and timid	
Does your dog like to swim?	Y N	Is your dog afraid of water? Y N
Does your dog have separation anxiety?	Y N	If yes, please describe:
List any well-known fears or apprehensions that your dog has. For example, thunder, storms, big dogs, men, loud noises, etc.		
What is the best way to comfort your dog during these times?		



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Pet Information Form

PET INFORMATION – PLEASE FILL OUT ONE FORM FOR EACH DOG	FOR CCDR USE ONLY																
Owner Name:	Client #:																
TEMPERAMENT (Continued)																	
Does your dog live with another dog that it does not like being separated from? Y N																	
Has your dog ever stayed at a boarding kennel before? Y N If yes, please briefly tell us about the experience:																	
Has your dog stayed with anyone else or had a sitter stay with him/her? Y N If yes, please briefly tell us about the experience:																	
Does your vet or groomer have any trouble with your dog? Y N If yes, please explain:																	
How does your dog react to being confined to a crate or pen? (Please circle one) Love it Tolerate it Hate it Destroys it Don't know																	
Does your dog chew on or destroy his bed or any other object? Y N If yes, please elaborate:																	
<table border="0"> <tr> <td>Is your dog a known jumper?</td> <td>Y</td> <td>N</td> <td rowspan="5">If yes, how high can he/she jump?</td> </tr> <tr> <td>Has your dog ever tried to climb a fence?</td> <td>Y</td> <td>N</td> </tr> <tr> <td>Is your dog a known digger?</td> <td>Y</td> <td>N</td> </tr> <tr> <td>Has your dog ever run away?</td> <td>Y</td> <td>N</td> </tr> <tr> <td>If your dog gets away from you, does it bolt?</td> <td>Y</td> <td>N</td> </tr> </table>		Is your dog a known jumper?	Y	N	If yes, how high can he/she jump?	Has your dog ever tried to climb a fence?	Y	N	Is your dog a known digger?	Y	N	Has your dog ever run away?	Y	N	If your dog gets away from you, does it bolt?	Y	N
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Owner Name:	Client #:
TEMPERAMENT (Continued)	
Has your dog ever shown any form of aggression toward another dog?	Y N
Has your dog ever shown any form of aggression toward a person?	Y N
If the answer to either of these questions is yes, please describe the circumstances in which this occurred:	
Please complete this sentence: My dog does not like it when _____	
OTHER DOGS	
Does your dog have any experience with other dogs? If yes, how does he/she react to other dogs?	Y N
Does your dog regularly play with other dogs (not living with you)? If yes, what type of play does he/she enjoy?	Y N
Has your dog ever been to day care? If yes, how did he/she do?	Y N
Has your dog ever been in a fight or had negative interactions with other dogs? If yes, what were the circumstances?	Y N
Does your dog particularly like or dislike any certain type of dog (size, color, breed, sex, etc.)?	
Likes:	
Dislikes:	
Please initial by “yes” or “no”:	
It is okay for my dog to play with other compatible dogs at Camp Cypress Dog Retreat.	
_____ YES	_____ NO



Camp Cypress Dog Retreat

Pet Information Form

DAY TO DAY

Can your dog use a doggie door? Y N
 Is your dog house-trained? Y N
 Is your dog allowed on furniture? Y N
 My dog spends _____ % time indoors and _____ % time outdoors.
 Is your dog a known excessive barker? Y N

What toys does your dog like:

Is your dog possessive of toys? Y N
 Is your dog possessive of his bed or other items? Y N

COMMUNICATING WITH YOUR DOG

What nicknames do you call your pet?

What commands does your dog know?

When I want my dog to:

Go outside, I say: _____ Come inside, I say: _____

Go to the bathroom, I say: _____ Stop what he/she is doing, I say: _____

When I want to praise my dog, I say: _____

When my dog is upset or nervous, I say: _____

FEEDING

Is your dog a good eater? Y N
 Is your dog possessive of food? Y N
 How many times per day does your dog eat? 1 2 3 Free Feed
 How much does your dog eat at each meal?
 What kind of food does your dog eat?
 Does your dog get treats regularly? Y N
 Is your dog allowed to have treats while at the retreat? Y N
 Does your dog have any dietary restrictions? Y N
 (no corn, no wheat, etc.)
 If yes, please complete the Diet Restrictions and Medication Form.

