



Kamp Kanine
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Veterinary Health Form

To ensure the health and safety of our kampers, we require verification that all vaccinations are up to date. Please submit this COMPLETED form with your application or when requested. Kamp Kanine will be unable to process your application without accurate veterinary and vaccination information. Client account is subject to a monthly account maintenance fee of \$25.00, and possible suspension of daycare service's if vaccination or titers expire and remain delinquent for 30 day or longer. We appreciate you helping us keep all of our kampers healthy!

Name of Dog: _____ Last Name: _____

Breed: _____ Altered? Y / N

Veterinarian Information:

Name of Hospital: _____

City: _____ Phone: (____) _____

Vaccinations: (Titers is acceptable except for Rabies)

Please fill in date of most recent vaccinations and attach record from veterinarian. 4 in 1 DHPP is required.

Rabies Exp Date _____ circle one: 1 YR 3 yr (required)

Distemper Exp Date _____

Hepatitis Exp Date _____

Parvovirus Exp Date _____ (repeated annually unless authorized by veterinarian in writing)

Parainfluenza Exp Date _____

Date Bordatella _____ (Required every 6 months. Needs to have been updated within the last 6 months.)

Fecal Test: (MUST also include Giardia via ELISA Test)

Date of most recent fecal test: _____ Results: _____

All dogs MUST prove to be free of parasite through a fecal examination.

Flea Program:

Is this dog on any flea prevention program (Required)? Y / N If yes, which one? _____

I hereby certify that the dog named above is under my care and has received all of the above treatments. This dog is in good health and has not been ill with any communicable diseases in the past 3 months.

Veterinarian Signature: _____ Date: _____