



RUN OF THE HOUSE DOG ADVENTURE CAMP

OWNER LIABILITY WAIVER AND HEALTH CERTIFICATION

I, _____ HEREBY CERTIFY THAT MY DOG(S) _____ IS/ARE IN GOOD HEALTH AND HAS/HAVE NOT BEEN ILL OR DISPLAYED ANY SYMPTOMS OF ILLNESS IN THE LAST 30 DAYS. I FURTHER CERTIFY THAT MY DOG(S) HAS/HAVE NEVER HARMED OR SHOWN AGGRESSIVE BEHAVIOUR TOWARDS ANY PERSON OR ANY OTHER DOG.

I HAVE READ AND UNDERSTAND THE FOLLOWING:

1. I UNDERSTAND THAT I AM SOLELY RESPONSIBLE FOR ANY HARM TO ANY PERSON OR OTHER DOG CAUSED BY MY DOG(S) WHILE MY DOG(S) IS/ARE ON THE PREMISES OF RUN OF THE HOUSE DOG ADVENTURE CAMP.

2. I FURTHER UNDERSTAND AND AGREE THAT RUN OF THE HOUSE IS AN OFF-LEASH PROGRAM WHERE THE DOG(S) ARE ALLOWED TO RUN FREE ON FOREST TRAILS WHERE THERE IS WILDLIFE WHICH CAN INCREASE THE RISK OF INJURIES (POSSIBLE ENCOUNTERS WITH PORCUPINES, SKUNKS, ETC.) OR INJURIES RESULTING OF SCRATCHES, CUTS OR MUSCLE STRAINS.

3. I FURTHER UNDERSTAND AND AGREE THAT IF MY DOG BECOMES ILL OR OTHERWISE INJURED AND IS IN NEED OF IMMEDIATE CARE, RUN OF THE HOUSE WILL TRANSPORT MY DOG TO _____ VETERINARY CLINIC, AS THE FIRST CHOICE; FOLLOWED BY ANY VETERINARY CLINIC AS REQUIRED, AND WILL ATTEMPT TO REACH ME AND MY EMERGENCY CONTACT PRIOR TO CARE BEING RENDERED. IF I AM UNREACHABLE, RUN OF THE HOUSE WILL HAVE THE VETERINARIAN PROCEED WITH THE TREATMENT DEEMED REASONABLY NECESSARY. I WILL ASSUME ALL FINANCIAL RESPONSIBILITY FOR VETERINARY TREATMENT. I CONSENT TO RUN OF THE HOUSE GIVING INSTRUCTIONS TO THE VETERINARIAN ON MY BEHALF.

4. I FURTHER UNDERSTAND AND AGREE THAT RUN OF THE HOUSE WILL NOT BE HELD RESPONSIBLE IF MY DOG(S) WANDER OUTSIDE OF RUN OF THE HOUSE PROPERTY AND BECOME LOST. RUN OF THE HOUSE WILL DO THEIR VERY BEST TO HELP LOCATE THE MISSING DOG(S).

5. I CERTIFY THAT I HAVE READ AND UNDERSTAND THE RUN OF THE HOUSE VACCINATIONS POLICY: DHPP (DISTEMPER, HEPATITIS, PARVOVIRUS, PARAINFLUENZA), BORDETELLA, RABIES ALL MUST BE UP TO DATE.



A SEPARATE VACCINATION FOR LEPTOSPIROSIS IS HIGHLY RECOMMENDED DUE TO THE SURROUNDING FOREST AND WETLAND. YEARLY TITER TESTS ARE ACCEPTABLE AS AN ALTERNATIVE TO STANDARD VACCINATIONS.

6. I CERTIFY THAT REVOLUTION OR AN EQUIVALENT MONTHLY TOPICAL/ORAL TREATMENT IS ADMINISTERED FOR PREVENTATIVE CONTROL OF FLEAS, TICKS, HEARTWORM, AND OTHER PARASITES.

7. I UNDERSTAND THAT RUN OF THE HOUSE DOG ADVENTURE CAMP REQUIRES A MINIMUM OF 24HRS NOTICE FOR *DAYCARE* CANCELLATIONS AND 72HRS NOTICE FOR ALL *BOARDING* CANCELLATIONS (REGARDLESS OF THEIR LENGTH); CANCELLATION FEES OTHERWISE APPLIED.

8. I UNDERSTAND THAT RUN OF THE HOUSE WILL REQUIRE THAT ANY SPECIAL DIETARY REQUESTS (SUCH AS: RAW FOOD, MEDICATIONS, ETC.) BE MADE KNOWN IN-WRITING *PRIOR TO* YOUR PUP'S APPOINTMENT (DAYCARE/BOARDING) – INCLUDING DETAILED ADMINISTRATION INSTRUCTIONS. PLEASE NOTE THAT THERE WILL BE A SURCHARGE OF \$2.00/DAY FOR THESE REQUESTS.

9. I UNDERSTAND THAT RUN OF THE HOUSE REQUIRES ANY EARLY DROP-OFFS/LATE PICK-UPS REQUESTS BE MADE A MINIMUM OF THREE (3) BUSINESS DAYS IN ADVANCE SO THAT WE MAY ACCOMMODATE YOUR REQUEST. PLEASE NOTE: PER EACH REQUEST, A \$20.00 CHARGE WILL BE APPLIED. WE ASK THAT THIS AMOUNT BE PAID SEPARATELY FROM YOUR PUP'S PACKAGE (IF APPLICABLE) AND PAID ON THE DAY OF THE APPOINTMENT.

I HAVE READ AND UNDERSTAND THE CONDITIONS AND STATEMENTS OF THIS AGREEMENT.

DATE:

SIGNATURE:

NAME OF DOG(S):

PRINT NAME:

POSSIBLE ALLERGIES/FOOD SENSITIVITIES:



OWNER INFORMATION:

CLIENT FIRST NAME:

CLIENT LAST NAME:

PHONE:

EMAIL:

ADDRESS:

EMPLOYMENT EMERGENCY CONTACT NUMBER:

**PERSONAL EMERGENCY CONTACT/2ND OWNER OR OTHER(S)
ALLOWED TO PICK UP PET(S):**

FAMILY VETERINARY CLINIC:

PET NAME: _____

BREED: _____

SEX: _____

DATE OF BIRTH: _____

NEUTER/SPAY STATUS: _____



RUN OF THE HOUSE DOG ADVENTURE CAMP CLIENT QUESTIONNAIRE

DOG HEALTH PROFILE:

1. DOES YOUR DOG HAVE ANY ALLERGIES? (IF SO, TO WHAT)?

2. DOES YOUR DOG HAVE ANY SPECIFIC DIETARY REQUIREMENTS OR RESTRICTIONS (IF SO, TO WHAT)?

3. IS YOUR DOG CURRENTLY TAKING ANY MEDICATIONS? IF SO, FOR WHAT AILMENT?

4. WHAT BRAND OF FOOD DOES YOUR DOG EAT?

5. DOES YOUR DOG HAVE ANY OLD INJURIES THAT WE SHOULD BE AWARE OF? PLEASE EXPLAIN.

6. ARE THERE ANY RESTRICTIONS THAT SHOULD BE PLACED ON YOUR DOG'S ACTIVITIES?

7. ARE THERE ANY AREAS ON YOUR DOG'S BODY THAT DOES NOT LIKE TO BE TOUCHED BY HUMANS (EARS, PAWS, ETC.)?

8. IS THERE ANYTHING ELSE THAT WE SHOULD KNOW ABOUT YOUR DOG'S HEALTH TO PROVIDE THE BEST CARE POSSIBLE?



DOG PERSONALITY PROFILE:

1. HAS YOUR DOG EVER BEEN IN A SOCIAL PLAY GROUP BEFORE (DOG PARK, DOG DAYCARE ETC.)? YES / NO **IF YES, PLEASE SPECIFY.**
WHAT SIZE DOGS DOES YOUR DOG PLAY WITH?

2. HAS YOUR DOG EVER SHOWN AGGRESSIVE BEHAVIOUR TOWARDS OTHER DOGS? YES / NO
IF YES, DESCRIBE THE SITUATION AND WHAT SORT OF BEHAVIOURS YOUR DOG EXHIBITED.

3. HAS YOUR DOG EVER SHOWN AGGRESSIVE BEHAVIOUR TOWARDS PEOPLE? YES / NO
IF YES, DESCRIBE THE SITUATION AND WHAT SORT OF BEHAVIOURS YOUR DOG EXHIBITED.

4. HAS YOUR DOG EVER BEEN INVOLVED IN A SITUATION WITH ANOTHER DOG THAT RESULTED IN A BITE WOUND TO EITHER DOG?

5. IS YOUR DOG POSSESSIVE OF TOYS? YES / NO

6. IS YOUR DOG POSSESSIVE OF FOOD? YES / NO

7. IS YOUR DOG POSSESSIVE OF WATER BOWLS? YES / NO

8. DOES YOUR DOG HAVE SEPARATION ANXIETY? YES / NO IF YES, PLEASE EXPLAIN:



9. HAS YOUR DOG EVER JUMPED OR CLIMBED A FENCE? YES / NO
IF SO, HOW HIGH? _____

10. HAS YOUR DOG EVER CRAWLED OR DUG UNDERNEATH A FENCE?
YES / NO

IF YES, PLEASE DETAIL THE TYPE OF FENCE AND TIME-FRAME THIS
OCCURRED:

11. PLEASE PICK THE DESCRIPTION THAT BEST DESCRIBES YOUR DOG'S
PERSONALITY:

- ☐ **CLASS CLOWN (A GOOFY, PLAYFUL, HIGH-ENERGY DOG THAT IS ALWAYS ON THE GO)**
- ☐ **BIG MAN ON CAMPUS (ALPHA DOG, CHOOSES TO PLAY REFEREE TO THE OTHER DOGS DURING PLAY TIME)**
- ☐ **CHEERLEADER (AN OPINIONATED AND VOCAL DOG THAT TELLS THE OTHER DOGS WHAT HE/SHE THINKS)**
- ☐ **TEACHER'S PET (SHY, PREFERS TO SIT OUT OF THE GROUP AND WATCH WITHOUT GETTING TOO INVOLVED)**
- ☐ **OVER ACHIEVER (THE DOG THAT IS ALWAYS INVOLVED IN EVERYTHING AND EVERYONE'S BUSINESS)**

12. PLEASE LIST ANY ADDITIONAL INFORMATION THAT YOU THINK WE
SHOULD KNOW ABOUT YOUR DOG TO PROVIDE THE BEST CARE POSSIBLE.



DOG TRAINING PROFILE:

1. WHAT IS YOUR DOG'S TRAINING HISTORY? PLEASE LIST WHAT TRAINING CLASSES (IF ANY) YOUR DOG HAS PARTICIPATED IN.

2. COMMANDS (PLEASE CHECK THE COMMANDS THAT YOUR DOG KNOWS AND UNDERLINE COMMANDS THAT YOU ARE WORKING ON.)

- ☐ NAME (WATCH ME)
- ☐ COME
- ☐ SIT
- ☐ DOWN
- ☐ LEAVE IT
- ☐ DROP IT
- ☐ GIVE
- ☐ No
- ☐ OFF
- ☐ STAY
- ☐ WAIT
- ☐ HEEL
- ☐ DON'T PULL
- ☐ GOOD BOY/GIRL/DOG

PLEASE LIST ANY OTHER COMMANDS THAT YOUR DOG KNOWS.



OWNER PROFILE:

1. HOW OLD WAS YOUR DOG WHEN YOU GOT HIM/HER? _____
2. WHERE DID YOU GET HIM/HER? (BREEDER, PET STORE, ETC.)

3. IF YOU GOT YOUR DOG AFTER SHE/HE WAS 3 MONTHS OLD, WHAT INFORMATION DO YOU HAVE ABOUT YOUR DOG'S PAST HISTORY?

4. HOW LONG IS YOUR DOG LEFT ALONE DURING THE WEEKDAYS?

5. WHERE DOES SHE/HE STAY DURING THAT TIME? (CRATE, KITCHEN, YARD, ETC.)

6. IS YOUR DOG CRATE TRAINED? _____
7. IS YOUR DOG HOUSE TRAINED? _____

DOG PERSONALITY PROFILE:

1. DOES YOUR DOG HAVE ANY BEHAVIOURAL ISSUES OR DESTRUCTIVE HABITS WHEN LEFT ALONE? YES / NO IF YES, PLEASE DESCRIBE:

2. DOES YOUR DOG BARK A LOT? YES / NO IF YES, WHAT PROVOKES IT?

3. DOES YOUR DOG GET FRIGHTENED BY UNFAMILIAR NOISES YES / NO IF YES, WHAT HAPPENS?

4. DOES YOUR DOG HAVE A FEAR OF THUNDERSTORMS YES / NO IF YES, WHAT HAPPENS?



5. CAN YOU TAKE A FOOD-BASED ITEM AWAY FROM YOUR DOG W/O HIM/HER GROWLING?

6. HAS YOUR DOG EVER SOCIALIZED WITH A LARGE GROUP OF DOGS (MORE THAN SIX)? YES / NO IF YES, PLEASE DESCRIBE:

7. IS THERE ANY TYPE OF PERSON (CHILDREN, MEN, ETC.) YOUR DOG ROUTINELY DISLIKES OR FEARS? YES / NO IF YES, PLEASE DESCRIBE:

8. IS THERE ANY TYPE OF DOG (SPECIFIC BREED, MALE, FEMALE, ETC.) YOUR DOG SEEMS TO HAVE A PROBLEM WITH? YES / NO IF YES, PLEASE DESCRIBE:

9. DOES YOUR DOG SHOW A PARTICULAR FONDNESS OR INTEREST TOWARD A SPECIFIC BREED OF DOG? YES / NO IF YES, PLEASE DESCRIBE:



DOG ETIQUETTE:

- 1. HOW DOES YOUR DOG REACT TO STRANGERS COMING INTO (OR NEAR) YOUR HOME/YARD?**

- 2. DO VISITORS BRING DOGS TO YOUR HOME? YES / NO IF YES, HOW DOES YOUR DOG REACT?**

- 3. IS IT COMMON FOR YOUR DOG TO JUMP ON YOU OR OTHER PEOPLE? YES / NO IF YES, HOW DO YOU RESPOND TO THIS?**

- 4. WILL YOUR DOG READILY SHARE TOYS WITH OTHER DOGS?**

- 5. DOES YOUR DOG WRESTLE WITH OTHER DOGS? YES / NO IF YES, DOES YOUR DOG USUALLY TAKE THE TOP OR BOTTOM POSITION WHEN WRESTLING?**

- 6. IS YOUR DOG ACCUSTOMED TO OFF-LEASH WALKING/HIKING? YES / NO**

- 7. WHEN YOUR DOG MEETS ANOTHER DOG (OFF-LEASH), DESCRIBE YOUR DOG'S GREETING?**

- 8. HAS YOUR DOG EVER PLAYED WITH DOGS LESS THAN 15 LBS.?**

- 9. PLEASE SHARE ANY OTHER INFORMATION YOU WOULD LIKE FOR US TO KNOW ABOUT YOUR DOG WHILE ATTENDING DAYCARE?**

