



## Dog Scouts of America

5040 Nestel Road East  
St. Helen, MI 48656

## Dog Health Information

Our goal at camp is to ensure that everyone attending feels at ease knowing that everyone's dog receives regular health examinations and the dog has received appropriate vaccinations. Rabies vaccinations are required by law. We do respect that individuals have different views on vaccinations and do accept titer levels on adult dogs. If using titers, please provide a copy of the report along with this form. This completed form must be received prior to your arrival at camp. *Please follow the directions in the accompanying email to submit this form.*

Dogs attending camp must have some form of regular flea and tick control. Mosquitos, ticks and other biting insects are present in the camp environment. We recommend that you always follow your veterinarian's advice with regard to flea and tick control and vaccinations.

**This form DOES NOT need to be completed by your veterinarian.** By completing and signing this form you are attesting to the validity of the information you provide. If false information is entered on this form, you and your dog are subject to being barred from attending or expelled from camp.

Dog's Name: \_\_\_\_\_ Handler's name: \_\_\_\_\_

Veterinarian's Office: \_\_\_\_\_ Phone: \_\_\_\_\_

Complete address of office: \_\_\_\_\_

Please choose one of the following options:

- My dog has tested negative for heartworm disease in the current year and is on heartworm preventative. Date of negative test: \_\_\_\_\_
- My dog is on year-round heartworm preventative. Name of preventative: \_\_\_\_\_

Please list the dates of the following vaccinations or provide a copy of titer levels with this form. (\* indicates optional vaccinations.)

Rabies: \_\_\_\_\_ DA-2PP/DHLPP: \_\_\_\_\_

Leptospira (may be included in DHLPP): \_\_\_\_\_

\*Bordetella: \_\_\_\_\_ \*Canine Parainfluenza: \_\_\_\_\_

\*Lyme Disease: \_\_\_\_\_ \*Canine Influenza: \_\_\_\_\_

My dog's stool is routinely tested for internal parasites. Date of last negative test: \_\_\_\_\_

My dog has not been exposed to contagious illnesses within the last 2 weeks. Please initial: \_\_\_\_\_

My dog is in good health and is ready for a vacation which could include swimming, hiking, running and other rigorous activities. Please initial: \_\_\_\_\_

My dog has health conditions that the camp staff should be aware of.

- No health conditions
- Yes. Please list: \_\_\_\_\_

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_