



CAMP CAC

“My Home Away From Home”

My Name (Pet's): _____

My Owner's First & Last Name: _____

If I Have An Emergency, Contact #: _____

Arrival: ___/___/___ Departure: ___/___/___ Pick-up Time: _____



I need special attention and nurse's care

Ask about “Special Needs Boarding” Additional costs apply.

I will Circle the bone of my choice below:



I will Eat CAC menu



I will bring my own food

How much: _____ How often: _____

I would like my fur kid to get a spa treatment:

I will circle my choice below. Additional Charges will apply.



Clean Me Up Bath: Deodorizing shampoo and towel dry.



The Works Bath: Deodorizing shampoo, nail trim, ear cleaning, blow dry, brush out, bandanna & perfume.



Deshedding Treatment: Our deshedding treatment helps to control shedding and improves overall coat quality.



Professional Grooming: Haircut of your liking, including everything in the “works” bath.



Brush my teeth: At bath time we will brush your pets teeth.



At Camp CAC, we walk our guest three times a day as courtesy.



I would like my pet to have extra playtime please sign him/her up for “Game On”

(Additional charge applies)

My pet needs to see the veterinarian for:

CAC is a flea free environment. All of our guests must be on monthly flea prevention. All campers will receive a Capstar upon arrival to insure camp stays flea free. (additional charge applies)

Which flea prevention does your camper use at home?

When it was last applied? _____

My Pet is on medications. Below are instructions.

1. Medication name: _____
_____ Tablet(s) Frequency: _____
2. Medication name: _____
_____ Tablet(s) Frequency: _____
3. Medication name: _____
_____ Tablet(s) Frequency: _____

In signing below, I agree that the information stated above is accurate. The discharge date & pick up time are correct & I understand that my pet cannot be discharged on Sunday. I am aware of the hours of operation here at CAC & understand that no pet will be discharged before/after office hours. It is my responsibility to provide proof of current vaccination records at the time of drop off. If my pet is due for vaccinations and/ or fecal it will be performed at my expense. I agree to allow CAC to perform any services needed should my pet become ill while boarding & understand that I will be responsible for any costs incurred. In the event that my pet gets dirty during his/her stay, I agree that he/she will receive at least a “Clean-Up” bath prior to departure, at my expense. I understand that there will be daily additional charges for administering medication(s). CAC takes great care to provide appropriate bedding, sanitized bowls and all other needs. CAC does not allow personal items to be left with the pet. I understand that if an exception is made, to allow personal item(s), CAC will not be held responsible for damages or loss of such. I understand that my pet will receive the best care while boarding at CAC.

Signature: _____ Date: _____