



Camp Wignall Registration Form  
 1837 Bridge Street ■ Dracut MA 01826  
 Tel: 978-454-8272 Fax: 978-458-4646

### Parent Information

**Date Printed:** \_\_\_\_\_ **Name:** \_\_\_\_\_ **Account #:** \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 While my pet is boarding/in daycare, I can be reached at: Phone # \_\_\_\_\_ Email: \_\_\_\_\_  
 In case of emergency, these people are authorized to make decisions on my behalf:  
 1-Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 2-Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
**\*Please advise your emergency contacts that they are responsible for making medical decisions for your pet if we are unable to reach you.**

### Camper Information: Boarding And Daycare

**CAMPER NAME:** \_\_\_\_\_ **DAYCARE or BOARDING** **BOARDING DATES:** \_\_\_\_\_ **TO** \_\_\_\_\_  
**PLAY:** a-Does your pet get along with others? Yes No **PICK UP TIME\*:** \_\_\_\_\_  
 b-Do you want your dog to play in a Play Group? Yes No  
 c-Do you want your dog to go out Only Alone? Yes No

**\*NOTE: Pick up AFTER 11AM will be charged full day**

**I understand there are certain risks involved with playing in groups and accept financial responsibility for them and my dog; and I understand that WAH Kennel Staff will make every effort to minimize those risks.** \_\_\_\_\_ (initial)

**FEEDING:** When do you feed your pet? AM PM BOTH  
 What type of food do you feed your pet? Wet Dry  
 What quantity of food does your pet eat each feeding?  
 \_\_\_\_\_ cups \_\_\_\_\_ cans  
 Does your pet have any dietary restrictions? Yes No  
 If YES, please list what: \_\_\_\_\_

**If food is not provided for your pet we will feed Hill's Sensitive Stomach**

**BATH** (includes 2 brush outs, nail trim, ear cleaning, bath, conditioning before going home) Yes No  
**HAIR CUT:** Yes No  
**Trim Instructions:** Length of hair desired for face: \_\_\_\_\_ ears: \_\_\_\_\_ legs: \_\_\_\_\_ feet: \_\_\_\_\_ chest: \_\_\_\_\_ back \_\_\_\_\_  
**Other:** \_\_\_\_\_

**MEDICAL:** Is your camper Spayed or Neutered? Yes No Is your camper on any medication? Yes No  
**Medication Administration Fee: \$12.88/day** \_\_\_\_\_ (initial)  
*All medications must be in original packaging. Medication information must be provided upon check in.*

**Other Instructions:**

**VACCINATIONS/PHYSICAL EXAMS:** Unvaccinated or overdue campers will be given a physical exam and the appropriate vaccinations and/or tests at pet owner's expense. Vaccine records from other veterinarians must be received prior to the camp Check In Date.

**The following vaccinations/test are required for Camp Wignall pets:** (1) Rabies, (2) Distemper, (3) Leptospirosis (dogs only), (4) Bordetella (dogs only) and (5) Canine Influenza (dogs only), (6) Parasite Test. *Parasite Test : DOGS/CATS (fecal test done within the last 12 months, negative results).*

Camp Wignall is part of Wignall Animal Hospital. As an animal hospital, we expect to provide the best possible complete care to all our boarding pets. This includes monitoring every pet's overall health during his/her stay and providing proper diet, exercise, recreation and medical care, if needed. Wignall Animal Hospital will treat any camper in a life-threatening emergency or serious illness lasting more than 24 hours or if contagious to other pets. Our staff will contact the pet's owner/emergency contact, whenever possible, before treatment is started. All treatment costs are the responsibility of the pet's owner, including the initial physical examination (\$69) when one is needed. Client Initials \_\_\_\_\_

**By signing I agree to all of the above.**

Owner Signature \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_ Rev06202019