



Camp Merrifield Questionnaire

Patient: _____

Breed: _____ DOB: _____

Date: _____

How does your dog react towards:

Large dogs (please check all that apply)

Small dogs (please check all that apply)

- Dominant
- Submissive
- Aggressive
- No reaction

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- Submissive
- Aggressive
- No reaction

Does your dog act possessive of toys or other resources? Yes/No

If yes, please

elaborate: _____

How would you describe the way your dog plays with other dogs? _____

How does your dog react to people?

Does your pet have any allergies?

Is there anything else we should know about your dog?

What Flea and Tick product do you administer (every 30 days) to your pet and when was it last given?

What Heartworm product do you administer (every 30 days) to your pet and when was it last given?



Camp Counselor: Pass _____ Fail _____ ** ____ / ____ Initials when evaluation is complete**

Reception: ** _____ Initial when verified**

Vax/Test	Date Given
RV	
DHPP	
Bordetella	
Influenza	
Fecal	Results: