
Owner's Last Name

Pet's Name

Pet's ID license, microchip#

Since our bark park clients are using veterinarians from different clinics, counties, and states, and since many vaccines have different amount of times for vaccine protection, we are asking the veterinarian to indicate the date the vaccine is due for an update.

REQUIRED VACCINES	DATE DUE
Rabies	
Parvovirus	
Canine Distemper	
Leptospirosis	
Canine Adenovirus	
Bordetella	

Fecal exam MUST occur yearly Date tested _____

Due to the environment of the park, we highly recommend dogs be on a flea, tick, and Lyme preventative program and we recommend the dog owner discuss with the veterinarian the use of the Canine Influenza vaccine.

OPTIONAL VACCINES GIVEN	DATE DUE
Lyme	
Canine Influenza	

I recommended the above pet receive the vaccinations as indicated above.

Veterinarians Signature _____ **Date** _____

Veterinarian Office _____

Pet Owner's Agreement

I, _____ agree to the above requirements and will monitor the wellness of my pet. I agree to not bring my animal to the Bark Park if there are signs of illness (coughing, vomiting, diarrhea, and lethargy).

Owner's Signature _____ **Date** _____

2010