



Complete Canine Academy (CCA) Medical Form

Your cooperation in providing clear and complete responses is greatly appreciated.
Kindly ensure that all information is easily readable and that you address all questions thoroughly.

Directions: Save this form to your computer, complete the saved form, gather supporting documents and email to

CompleteCanineAcademy@gmail.com

By filling out this form you are agreeing to electronic signature

Owner Information	
Name	
Address	
Phone	
Email	

Dog Information	
Name	
Age	
Breed	
Color	
Spayed or Neutered?	
Microchip Number, if applicable	



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Brand of Food	
Amount eaten daily	_____ cups
Supplements Provided	
Current Medications	
Any Known Allergies	

Current Vaccinations		
Type	Date Given	Date Due
Rabies Vaccine		
Parvo/Distemper Vaccine		
Bordetella Vaccine		
Other:		
Other:		

Heartworm Test - For dogs <u>over</u> 12 months of age	
Date of Test:	Result:

Preventatives			
Type	Brand	Date Given	Date Due
Heartworm Prevention			
Flea & Tick Prevention			
Dewormer, if any			



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The owner acknowledges that in the event of detecting fleas/ticks on their dog, CCA will administer a flea/tick bath. The owner is responsible for promptly supplying a flea/tick preventative and covering all associated costs involved with any and all dogs and property that may have been exposed.

Fecal Parasite Test

Negative fecal parasite test, including Giardia, is required within 14 days of arrival. We recommend testing at 14 days in advance to allow time for treatment if needed, avoiding delayed training start date. Example: your dog's arrival date is 6/14, take the fecal sample into the vet on 6/1.

Emergency Contacts

Ensure that your emergency contacts are informed of this responsibility. In the event we are unable to reach the owner, we will get in touch with the listed emergency contacts. It is imperative that this contact be local and available to retrieve your dog if the need arises.

Emergency Contact 1 Name	
Emergency Contact 1 Phone	
Emergency Contact 2 Name	
Emergency Contact 2 Phone	

In the event of a medical emergency and the owner cannot be reached, the owner gives permission for the emergency contacts listed above to make medical decisions for the dog listed and described above, under the supervision of a veterinarian.

Owner's Signature



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Emergency Vet Care

Veterinary Care. If the dog listed and described above requires veterinary care during the training period, CCA will make every attempt to contact the owner. If the owner cannot be reached CCA will attempt to reach the listed emergency contacts, failing that or in the case of a medical emergency, CCA will arrange on behalf of the owner for veterinary care. All veterinary fees are the responsibility of the owner. If convenient, CCA will take the dog to the dog's veterinarian. However, CCA reserves the right to take the dog to a veterinarian selected by CCA and using reasonable care in the selection of a veterinarian. CCA will take all reasonable and necessary precautions during the training process to avoid injury. Owner hereby consents to the emergency veterinary care for the dog and gives CCA full authority to consent to such treatment as the agent of the owner:

In the event that owner or emergency contact cannot be reached, CCA will be allowed to make decisions regarding emergency care reasonably required to save the dog's life, to preserve the use of organs or limbs, or to alleviate severe pain.

AND

In the event CCA cannot reach the owner and/or emergency contacts, CCA will be allowed to make decisions regarding emergency euthanasia, only if All of the following criteria is met (a) recommended by the veterinarian, (b) the owner and/or emergency contacts cannot be reached after reasonable attempts, (c) treatment is not likely to be successful, (d) the dog may be suffering AND (e) the expense of continued treatment may be unreasonable in light of the likely outcome.

REQUIRED

In the event of a medical emergency and the owner can not be contacted,
the owner consents to pay medical expenses no more than:

\$ _____ .00

Owner's Signature

Date