

Playtime and Training Participation Requirements

Welcome to VCA White Oak Animal Hospital's playtime and training program. In order to participate in our program, your dog must meet the following health requirements.

****Please take this form to your veterinarian to complete prior to participation.****

Date: _____ Pet's Name: _____ Owner's Name: _____

Vaccines:

Date Given

_____ DHLPP (Dist/Hep/Lepto/Parainfluenza/Parvo) _____ 1 year _____ 3 year
_____ Bordetella
_____ Canine Flu Bivalent
_____ Rabies ____ 1 year ____ 3 year

Parasite Testing:

Date Performed

_____ FECAL exam with Giardia. **Results:** _____

Veterinarian Signature

Date

Veterinarian's address and contact information: _____

Owner Please Initial:

_____ Negative fecal results required for participation.
_____ Monthly heartworm and intestinal parasite control highly recommended. Preventions that cover whipworms, hookworms, and roundworms are ideal.
_____ Flea and tick control highly recommended. Products that cover adult fleas, immature fleas, and flea eggs, as well as ticks, are ideal.

Owner Signature

Date