

Client Information

Name _____

Breed _____

Age _____ Gender _____ Spay/Neuter? Y/N

Colour _____

Working demands (does your dog compete in dog sports?
Frequency and duration of walks/swimming/workouts etc)

Have you ever had any diagnostic procedures such as radiographs, or ultrasounds done on your dog? If so, what location, and what was the concern and results?

Known history of other lameness or injury not associated with above mentioned procedures.

Known history of illness or health limitations

Has your dog undergone any surgeries or medical procedures other than spay/neuter? If so, when, and what for?

Please list any medications or supplements currently being administered

(Please fill out and return, along with Waiver and Release of Liability, to Action K9 before or at time of appointment)

Owner Information

Name _____

Phone Number _____

Address _____

Email _____

Would you like to be added to our mailing list? (updates on scheduling, local health alerts, events, and dog health information) YES / NO

Veterinarian Name _____

Veterinarian Phone Number _____

What are your current concerns with regards to your dogshealth and performance? (reluctance in performance, noticeable imbalances or soreness, discomfort or "crankiness," etc)

Does anything seem to improve, or exacerbate the condition?

Has your dog ever received massage or bodywork before? Yes/N



Waiver and Release of Liability

I am allowing my companion animal to receive massage therapy. I understand that massage is not a substitute for medical treatment or medications, and that it is recommended that I work with my Veterinarian for any medical conditions that my animal may have. I understand that any of the massage sessions are for the purpose of stress reduction, relief from muscular tension, general relaxation and improvement of circulation and range of motion.

I understand that the Massage Therapist cannot diagnose illness or disease, cannot prescribe medications. I understand that any information provided by the Massage Therapist is for educational purposes only, and is not diagnostically prescriptive in nature.

I have informed the Massage Therapist of all my animal's known physical conditions, limitations, medical conditions and medications. It is my responsibility to update this information with the Therapist and contact my Veterinarian if my animal's physical condition, limitations, medical condition or medications should change.

By signing this release, I hereby waive and release the Massage Therapist listed below from any and all liability, past, present and future, relating to massage and bodywork.

Therapist: Brittany Cameron

Name: _____

Signature: _____

Date: _____

Brittany Cameron

Canine Massage Practitioner, Registered Equine Massage Therapist

3157 Hwy 311, North River NS B6L6H6

(902)957-1667

(This page is for your own records ☺)

What can you expect with your first visit?

The first time I meet a dog, I will want to perform a dynamic assessment, observing your dogs movement while performing different tasks (straight line walking/trotting, small circles, sit-to-stands, etc) based on the concerns you have and what I may want to have a closer look at. In this, I am looking to determine areas of weakness, imbalance, pain, or restriction. This will be followed by a full palpatory assessment, and range of motion assessment to isolate and identify specific concerns and their cause. The treatment itself will then be tailored to your specific dog, and consist the use of sports massage therapy techniques, and a combination of any stretching, remedial exercises, hydrotherapies, cryotherapy, and kinesiology taping applications if applicable. You will then be provided with a series of home care recommendations to address your concerns and provide support care between treatments. These recommendations may consist of stretching routines, strengthening and conditioning exercises, hydrotherapy, massage, chiropractic follow up, or veterinary assessment should that be required. You should allow at least 1 hour in your schedule for the initial visit, and 45 minutes to 1 hour for any follow up treatments.

Cancellation Policy

I must be provided with a minimum of 24 hours notice in the case of having to cancel or reschedule. In the spirit of fairness, I do my best to always provide my client with the same courtesy! Both my time, and yours, is valuable, and I always strive to do right by my clients with regards to last minute changes, and hope they will return the respect and courtesy to the best of their ability. I understand that some circumstances are unpredictable and unavoidable. Below are the fee's charged in the event of last minute cancellation, or no-show, taxes are included in the pricing.

- Under 24hrs cancellation - \$20
- No-Show – Full fee including quoted mileage

How to prepare for your massage therapists visit

Please make sure to notify your therapist ahead of time in the case of any changes to health or medications as many issues may be contraindications to massage.

I will provide a massage table, but should your dog be unable to use the table due to mobility or anxiety, please have a comfortable large bed or mat available for the dog to rest on during treatment.

Having some of your dogs favourite treats or toys on hand is recommended as these can be used to address potential anxiety if they are unsure about being handled by a stranger, as well as to perform some exercises and stretches that may be required.

I look forward to working together to help your dog feel and perform its best!