



Cecil County, Maryland - Chapter 142. Animal Care and Control

Appendix 7. Exercise Plan for Dogs

EXERCISE PLAN FOR DOGS	Date Created:
-------------------------------	----------------------

SECTION 1. EXERCISE PLAN HAS BEEN ESTABLISHED BETWEEN:

A. Licensee / Kennel Owner	B. Licensed Veterinarian
1. Kennel License Number	1. Name
2. Kennel Name	2. Clinic/Hospital Name
3. Owner Name	3. MD State License Number
4. Mailing Address	4. Business Address
5. City, State and Zip Code	5. City, State and Zip Code
6. Telephone No.	6. Telephone No. (business)

SECTION 2. EXERCISE PLAN HAS BEEN ESTABLISHED BETWEEN:

(The Exercise Plan must be completed by all Kennels and 501c3 Dog Rescue Organizations as required by Chapter 209. Animal Care and Control)

A. Frequency (how many times per day)
B. Method (kennel run, exercise yard, walked on a leash, etc.)
C. Duration (length of time)

I find the exercise plan outlined above to be sufficient for the type of kennel/organization and dogs maintained in this kennel.

Signature of veterinarian	Date
----------------------------------	-------------

I understand my responsibilities to follow the exercise requirements as outlined in this plan.

Signature of licensee/kennel owner	Date
---	-------------

A copy of the Exercise Plan must be kept with your records at the kennel site.