

Personal Medical Information

Please attach a copy of the FRONT and BACK of your insurance card. Insurance information required for Camp admission.

Camper's
Name _____

List any medical difficulties for which camper is currently being treated: -

Check and give dates for conditions which the camper has experienced. asthma _____ seizures _____

ear infections _____ heart disease _____ diabetes _____ dizziness _____ hay fever _____

Current medications: Fill out **attached** Camper's medication form and send with registration. If no medication is needed, please sign the **Authorization for Swimming** at the bottom of the form and return with registration.

Emergency contacts:

Name _____ Phone _____

Name _____ Phone _____

Primary Care Physician _____ Phone _____

Permission for treatment. If my child becomes sick while attending any camp function, I give permission for the camp's health/safety representative to issue the following non-prescription medications:

___ Acetaminophen (Tylenol)

___ Antihistamine (Benadryl)

___ Ibuprofen (Motrin, Advil)

___ Mild laxative (Ex-lax)

___ Imodium AD

___ Antacid (Mylanta)

___ Calamine lotion

___ Sore Throat Lozenge

****Parent signature** _____ **Date** _____

Authorization for medical treatment, sunscreen use and application, and media release. IN CASE OF EMERGENCY, I understand that every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper

Inhalers and EpiPen will remain with campers at all times.

Prescription medicines must be in original pharmacy packaging and will only be dispensed per doctor's instructions.

Non-prescription medicines must be in original packaging and will only be dispensed per package instructions.

Authorization for Swimming

The Camp Wo-Me-To pool has a shallow water section and a deep-water section. Campers who want to swim in the deep water **must** pass a swimming test by our lifeguards. There are lifeguards on duty at all times. No camper will be allowed in the pool area without a signature below.

Check one: Advanced Swimmer Average Swimmer Non—Swimmer

_____ is granted my permission to go swimming while attending camp.

****Signature of parent or guardian** _____