



# CAMPER MEDICAL RELEASE FORM SUMMER 2012

Thank you for your registration for Camp Wojtyla! We are very excited to have you on board and want to make sure that we have a safe and injury free summer. Please fill out the form below, have it signed at the bottom by a medical professional, and return it to Camp Wojtyla, PO Box 18452, Golden, CO 80402 by the first day of Camp.

Below is a checklist of items that need to be submitted with this form to Camp Wojtyla by the 1<sup>st</sup> day of Camp.

- Proof of physical in the last 24 months. This can be fulfilled by your doctor signing the release below.
- Vaccination record.**
- Permission from you doctor permitting us to give your child Ibuprofen, Tylenol, and /or Benerdryl at its suggested dose in case of swelling, fever, bug bites, or other illnesses while at Camp Wojtyla by signing below.
- Permission from your doctor permitting us to give your child their prescription medications by signing below.

Note: If you do not seek medical attention or immunize yourself for religious reasons, please include a note stating your situation, and that you are in good health. Please email any questions to Brianna Lawson at registration@camp-w.com.

## CAMPER INFORMATION

Camper Name \_\_\_\_\_

Camper Phone Number \_\_\_\_\_ Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Primary Physician's Name \_\_\_\_\_ Primary Physician's Phone Number \_\_\_\_\_

**Please list any medications or foods your child is allergic to:**

**Please list below any prescription and non-prescription medications your child will be taking at the time of Camp, including dosage and frequency.**

\*\*\*Please note: Any prescription drugs need to be in original bottle from the Pharmacy with instructions on dose and frequency given. Any drugs listed below also need a doctor's note saying that your child can take these drugs. For instance, if Ibuprofen is listed and brought with the camper, a note is required from the doctor stating that they can take this medication at a specific frequency and dose. Furthermore, if you would like us to be able to give your child over-the-counter Ibuprofen, allergy medicine or tylenol for swelling, a bug bite, fever or other common camp illnesses, please include a doctor's note saying the child can have this medications and at what dose/frequency. The State of Colorado is very careful when it comes to medications. This is in order to protect children from reactions to unknown allergies and overdose. We thank you for your attention to detail in this matter!

Medication and Reason	Dosage	When to Take

**MEDICAL RELEASE (To Be Filled Out by a Medical Professional)**

I, \_\_\_\_\_ (Name of Medical Professional), consider \_\_\_\_\_ (Name of Camper) to be in good health, free of any communicable diseases and able to participate in summer camp related activities including but not limited to high altitude hiking, rock climbing, camping, field games, etc. I also hereby swear that \_\_\_\_\_ (Name of Camper) has had a medical Physical in the last 24 months.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ (Name of Camper) has medical permission to receive the prescription medications listed in the "Camper Information" section of this form while at Camp Wojtyla and to receive:

- \_\_\_\_\_ Tylenol at suggested dose if necessary
- \_\_\_\_\_ Ibuprofen at suggested dose if necessary
- \_\_\_\_\_ Benadryl at suggested dose if necessary

Signature \_\_\_\_\_ Date \_\_\_\_\_