

MEDICATION FORM

INSTRUCTIONS

Campers who are bringing medication to camp must have a parent/guardian complete this form in its entirety. All medication along with a signed copy of this form must be turned in to camp nurses on the day of departure.

Please put all medication in the original pharmacy labeled bottle(s) along with a signed copy of this form in a sealed Ziploc bag with the camper's first and last name clearly printed on it.

Make sure campers have enough medication for the entirety of camp. Over the counter medication such as children's Tylenol and children's Benadryl will be available at the nurse's station. **Epipens and inhalers should be kept on the camper (or counselor) at all times for immediate access**, but a medication form should still be completed and turned in to camp nurses.

CAMPER INFORMATION

Name: _____

Date of Birth: _____

Name of Medication	Check all that apply	Dosage	Frequency / Time of Day
	<input type="checkbox"/> Prescription Medication <input type="checkbox"/> Over the Counter <input type="checkbox"/> Vitamin <input type="checkbox"/> Taken on routine basis <input type="checkbox"/> Taken as needed <input type="checkbox"/> Epipen <input type="checkbox"/> Inhaler		
Special Instructions (crushed in food / taken with food):			

CAMP NURSES ONLY

Cabin Number: _____

Leader Name: _____

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