



Camp Medical Form



This Form is important. Please ensure your child brings it to camp.

Child's Full Name		Date of Birth	
Address			
Home Telephone No.		Work Telephone No.	
Mobile Telephone No.		Further Contact No.	
Doctor's Address			
Doctor's Name		Doctor's Telephone No.	
Date of Child's last Anti-Tetanus Injection?			

Child's Medical Information *(Tick yes or no)*

Does your child suffer from any illness or disability?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Does your child suffer from any allergy or other medical condition?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If the answer to either of the above questions is Yes then please give details below. If more space required then please use the reverse of this form.					

If your child is taking prescribed medicines please give details below. All medicines must be handed in on arrival. They will only be administered at the times directed below. *(If your child has an inhaler please bring 2 and label both with the child's name.)*

Only doctor prescribed medicines will be allowed to be taken.

<u>Day</u>	<u>Medicine</u>	<u>Dosage</u>	<u>Morning</u>	<u>Noon</u>	<u>Evening</u>	<u>Before Bed</u>	<u>Optional</u>
<u>Saturday</u>							
<u>Sunday</u>							
<u>Monday</u>							
<u>Tuesday</u>							
<u>Wednesday</u>							
<u>Thursday</u>							
<u>Friday</u>							

I delegate the Camp Leader or the Assistant Camp Leader to authorise, in my name, any medical treatment my child may require while he/she is at the centre, **if considered necessary by a doctor.**

Signed:	Name:	Relationship to child:
I delegate the Camp Leader or the Assistant Camp Leader to authorise the first aiders to give my child either of the following medication if necessary.	Calpol <input type="checkbox"/> Piriton <input type="checkbox"/> Please ✓ to indicate yes.	Signed:

Please ensure your child brings this form to camp. Do NOT hand it over on the bus but wait until the child arrives at camp whereupon the form will be collected by the Booking - in Brother/ Sister along with any medications for safe -keeping in the First Aid Room.