



Health and Emergency Information

This completed form must be on file while your child is at camp.

Child's Last Name _____ First Name _____ Middle Initial _____

Gender M / F Birth date _____ Age _____ Grade in Fall _____

Child's Address _____ City _____ Zip _____

Child Lives with Mother Father Other _____

Home Phone _____

Mother/Guardian _____ Cell Phone _____

Email _____ Wk Phone _____

Father/Guardian _____ Cell Phone _____

Email _____ Wk Phone _____

If neither parent can be reached, please hereby authorize another adult to care for your child:

Name _____ Home Phone _____

Cell Phone _____ Relationship to child _____

Child's cautions Medications to be taken, behavioral concerns, physical restrictions _____

Allergies to food, medication, other _____

Insurance Company _____ **Group #** _____

ID # _____

Parent/Guardian Authorization
 The above named has my permission to attend camp. I/we understand that the camp environment and activities pose risks to personal health and safety, including the particular risks inherent in waterfront, outdoor activities, and horse-related activities. I/we hereby agree to hold harmless the North Pacific Conference, Cascades, and the camp staff in the event of injury at camp. I/we give consent for medical care in the event of injury or illness. I/we give permission for use of photos of me or my family in publications and release my right to any remuneration from said photos.

Parent/Guardian Signature _____ Date _____

Medication Note

Insert this note with medication in ziplock bag.
Bring to Nisqually Center when you come to camp.

Med Note

Last: _____ First: _____

Camp Timber Rock Brightwood Station Ranch Intensives
(please circle which camp your child is in)

Medical Condition: _____

Allergies: _____

Medication #1: _____

Breakfast Lunch Dinner Bedtime As Needed

Dosage: 1 pill 2 pills _____

Other Instructions: _____

Medication #2: _____

Breakfast Lunch Dinner Bedtime As Needed

Dosage: 1 pill 2 pills _____

Other Instructions: _____

Please use back of note for further comments or instructions.

➔ For Camper Meds

If your camper requires daily medications, please fill out the Med Note. Place it inside a ziplock bag with the med bottles. Drop these off with the Health Assistant when your child arrives at camp (don't pack them in the suitcase).

All medications, **even over the counter meds and vitamins**, need to be collected – no meds are allowed in the cabins. Only those that are needed immediately – asthma rescue inhalers and Epi-pens, are exempt. These are carried by the counselor for safe keeping. (Please bring a spare.)

Don't worry if your child has an unforeseen need for OTC meds while at camp. We keep some stock medications on hand: Tylenol (acetaminophen), Benadryl (diphenhydramine), throat lozenges, Pepto Bismol, and Tums (great for tummy-aches caused by homesickness).

To protect our campers and staff, when you check your camper in at their cabin, the counselor will privately perform a simple check to prevent any exposure to head lice.

We try our best to care for your child as conscientiously and lovingly as you would at home, and to allow them to enjoy camp to the fullest!

Have Questions?

Contact our on-site R.N: terrywhitcomb@cascadescamp.org.