



Summer Camp 2019 - Medication

Prescription and Nonprescription Medication

Camper may self-administer medication during camp hours as long as this form has been completed and returned to JayDee's Summer Camp Staff. JayDee's manager, lead camp counselor or camp staff will supervise the self-administering of medication by the camper. The adult dropping off the camper in the morning should give all medications and this completed form to camp counselor. Prescription medications must be provided to the camp in the original pharmaceutical container bearing a pharmacy label which shows the prescription number, date filled, expiration date, prescribing physician's name, patient's name, name of medication, and directions for taking medication.

Camper's Name: _____ DOB: _____

Medication Name: _____

Reason for Medication: _____

Amount of Dosage: _____

Time of Dosage(s): _____

Days/Dates to be Taken: _____

Known Side Effects/ Toxic Effects: _____

Physician's Name: _____

Physician's Address: _____

Work Phone: _____

Physician's Signature: _____ Date: _____

My child has had at least one dose of the above medication and has not had any negative reactions.

Date of first dose: _____

Parent's name (printed): _____

Parent's signature: _____

Date: _____

Phone Number: _____

REQUIRED: PLEASE PROVIDE A MEDICAL NOTE FROM YOUR PHYSICIAN

JayDee's Summer Camp Approval: _____ Date: _____