



YOUTH CAMP HEALTH EXAM/RECORD FOR CAMPERS AND STAFF

Physical Exams Are Valid For 3 Years From Date of Last Examination

- Camper
- Staff

Completed Form Needs to Be Submitted on CampDoc

Name _____ Date of Birth _____ Phone _____

Guardian _____ Address _____

Emergency Contact _____ Telephone _____

Date of Arrival at Camp: _____ Departure Date: _____

TO BE COMPLETED BY THE HEALTH CARE PROVIDER

Every camper and each staff member entering camp shall furnish a health history of his or her health status that is completed and signed by the individual camper or staff member, or by the parent or guardian if the camper or staff member is under the age of 18. This history shall be kept on-site as long as the camper or staff member is at camp and shall include the following:

- (1) A description of any health condition requiring medication, treatment, special restriction or consideration while at camp,
- (2) A record of immunizations,
- (3) A record of any allergies.

Date of Exam ____/____/____

May participate in all camp activities YES NO

May participate except for: _____

Does the individual have any known medical or emotional illness or disorder that poses a risk to other children or which affects the individual's functional ability to participate safely in a youth camp? YES NO

If yes, please explain _____

Are there any prescription or over the counter medication(s) this individual needs to take while at camp? YES NO

If yes, indicate names of medication(s), dosage, and how and when to be taken: _____

NOTE: A written authorization and parent permission for the administration of medication at camp are required. All medication must also be logged in CampDoc as well. All medications are required to be in the original bottle, with labels that show the camper's name, and instructions on how the medication should be given when given to the Health Supervisor.

Does the individual have any disabilities or special health care needs such as allergies, special dietary needs? YES NO

If yes, please explain _____

NOTE: If the camper has a special health care need or disability that requires special care be taken or provided during the time the individual is at camp, an individual plan of care shall be developed with the parent and health care provider and updated as necessary. The plan shall include appropriate care of the camper in the event of a medical or other emergency and signed by the parent and staff responsible for the care of the camper. The individual care plan is required to be signed by the parent/legal guardian and staff member.

The individual has the following required immunizations prior to the start of camp. Medical exemptions consistent with CDC guidance and applicable state law will be accepted with appropriate documentation. YES NO

NOTE: Immunization dates and exemption documentation must be submitted on CampDoc

Minimum Immunization Requirements for Campers

- Measles, Mumps, Rubella (MMR)
- Varicella (Chickenpox)
- DTaP, DT, or Tdap (age-appropriate)
- Hepatitis B
- Polio
- Meningococcal (age-appropriate)
- Haemophilus influenzae type b (age-appropriate)

Minimum Immunization Requirements for Adults

- Immunity to Measles, Mumps, and Rubella (MMR)
- Immunity to Varicella (Chickenpox)
- Td or Tdap booster within the past 10 years
- Pneumococcal (PCV 13 and PCV 23) if ages 65 years or older
- Meningococcal (up to age 21)
- Haemophilus influenzae type b

Additional Comments:

Campers, counselors, staff, and volunteers should stay home if they are experiencing symptoms of illness that could be contagious, including fever, vomiting, diarrhea, significant cough, sore throat, or other symptoms that may indicate infection.

The camp nurse will conduct a brief health screening upon arrival at camp. Individuals who appear acutely ill may be asked to leave if it is determined that they cannot safely remain at camp.

Printed Name of Health Care Provider: _____

Address: _____ Phone: _____

Signature of Physician, PA, APRN or RN _____ Date Form Signed: _____