

TALBOT KID'S CAMP – Medical Information Form
May 12th & 13th 2023

Child's Name: _____

Preferred/Nickname: _____

Allergies: (food, medicines, insects, plants, etc.)

Medications to be Given During Camp: (name, dose, time)

A doctor's order MUST be provided in order for medication to be given by camp nurse.

Medication Name	Dosage	Times

Dietary Restrictions:

Medical Problems/Injuries:

Mental Health/Emotional Issues:

Activities Your Child May Not Be Able To Do and Why:

Any Additional Health/dietary Information We Should Know About Your Child:

Parent/Guardian's Name: _____
(PRINT)

Parent/Guardian's Signature: _____

Date: _____