	MATION – (1) slip per camper		
	t medications in a parent provid prmation and place this note in t	<u> </u>	baggie. (1) baggie per student. in their prescription container.
	lers may keep them with them;		
Student:	School:	Parent:	Parent Phone:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Medication			_ /
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Cabin #:	Huddle #:	n and nurse use only belo	Male /Female
	MATION – (1) slip per camper t medications in a parent provid	ed one-gallon zip lock clear	baggie. (1) baggie per student.
✓ Please PRINT info	prmation and place this note in t	he baggie with medication	in their prescription container.
✓ Campers with inha	lers may keep them with them;	however, scheduled allergy	med's should be submitted.
Student:	School:	Parent:	Parent Phone:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
		n and nurse use only belo	
Cabin #:	Huddle #: _		Male /Female
	MATION – (1) slip per camper		
\checkmark Campers to submi	t medications in a parent provid		
	prmation and place this note in t lers may keep them with them;		in their prescription container. med's should be submitted
*			
Student:	School:	Parent:	Parent Phone:
Medication			ER / BEDTIME Other:
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
Medication			
Dosage:	Frequency: MORN	ING / LUNCH / DINNE	ER / BEDTIME Other:
		n and nurse use only belo	
Cabin #:	Huddle #: _		Male /Female