

Youth Camp Health Exam/Record For Campers And Staff

Physical Exams Are valid for 3 years from the date of last examination

State of Conn. Dept. Of Public Health – Community Based Regulations (860) 509 – 8045

Conn. State law states that all campers must have a valid Medical Exam Form on file with the camp they are attending.

_____ Camper _____ Staff

Name _____ Date of Birth _____ Phone _____

Guardian _____ Address _____

State _____ Zip _____ Emergency Contact _____ Phone _____

**TO BE COMPLETED BY THE SPECIFIED MEDICAL PRACTITIONER
DATE OF EXAM _____**

_____ May participate in all camp activities
_____ May participate except for: _____

Medical Information pertinent to routine care emergencies: _____

Is this individual taking medications? _____ Yes _____ No
If yes, indicate prescription: _____

Does the individual have allergies? _____ Yes _____ No Explain: _____

Is the individual on a special diet? _____ Yes _____ No Explain: _____

This individual has the following immunizations currently recommended by the American Academy of Pediatrics and National Advisory Committee on Immunization Practices:

Measles	_____ Yes	_____ No	Hepatitis B	_____ Yes	_____ No
Mumps	_____ Yes	_____ No	Diphtheria	_____ Yes	_____ No
Rubella	_____ Yes	_____ No	Pertussis	_____ Yes	_____ No
Chickenpox	_____ Yes	_____ No	Polio	_____ Yes	_____ No
Tetanus	_____ Yes	_____ No			

Comments _____

PRINT NAME OF PROVIDER _____ Sign _____

Telephone Numer _____ Date _____

Medical care providers address _____