

# REQUIRED Additional Camp Form



(PLEASE PRINT)

LAST NAME \_\_\_\_\_

GRADE (FALL 2020) \_\_\_\_\_

FIRST NAME \_\_\_\_\_

DATE \_\_\_\_\_

CAMP(S) ATTENDING \_\_\_\_\_  
(i.e. Camp Mansfield, Basketball Camp, etc.)

SESSION(S) ATTENDING \_\_\_\_\_

**\*\*\*This form, along with a general registration form, must be completed before your child will be registered for all camps\*\*\***

### Grouping requests and camper self-sign in/out permission

**Group Request:** We are happy to group campers with friend/relative who will be in the same grade in the Fall when possible.

Please group with a friend or relative,  
Friend/Relative's Name \_\_\_\_\_

**Camper Sign In/Out** (entering grades 6 and up only): My child \_\_\_\_\_ **IS** allowed to sign himself/herself in and out of camp each day. I realize he/she may **NOT** sign other children (including siblings) in/out.

We would like to take advantage of summer swim education program at camp. If you do not check off this box your child will not participate in swim activity.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### Health Information (information is confidential to Camp Staff)

1. Describe any current health conditions requiring medication, treatment, or special restrictions or considerations while at camp.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorized camp staff may administer limited medication (primarily epi-pens and asthma inhalers) during the camp day in accordance with town policy. Campers are not allowed to carry their own medications, with the exception of inhalers and epipens. Self-administration of epipens and asthma inhalers require a self-administration of medication form to be completed. Forms available upon request.

2. Please list any camper allergies (food, bee stings, medications, etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. Does the camper need special assistance or have any physical, sensorial, social, behavioral or developmental limitation. **If yes, a "Special Assistance" form must be filled out 15 days before attending camp.** Please request the special assistance form at the Community Center. Also contact the camp director prior to your child starting camp.

**To the best of my knowledge, the above information is up to date and correct.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_