

# Brantwood Camp

## 2016 Registration

### Step 2

Please find enclosed the following forms:

#### **Health History Form**

This form should be signed by parent/guardian and include an emergency contact other than a parent/guardian.

#### **Physical Examination Form**

Your camper's physician may substitute their own form in place of this one. In order to be used for camp, the exam date should be after August 19, 2015. This form must be signed by your camper's physician and a complete record of immunizations must be provided.

#### **Over the Counter (OTC) Medication Consent Form**

This form is for the occasional use of OTC medications only. Place a check mark next to the medication you give permission to be administered during your camper's stay at camp. Please be sure to sign the form.

#### **Prescription Medication Form (If needed)**

Please submit this form only if your camper requires the administration of prescription medication. Use the spaces provided and include all information requested. If you need additional space use another form. Please read the guidelines at the bottom of the form. This form must be signed by the parent/guardian and your camper's physician.

#### **Inhaler and/or EpiPen Form (If needed)**

The State of New Hampshire requires this form be completed by your camper's physician in order for your camper to possess and self-administer an asthma inhaler or Epinephrine Auto-Injector while at camp.

#### **IMPORTANT**

Your camper's application **will be initially processed** without the physical if you are waiting for an appointment. You must notify us of the date of the physical exam. Final enrollment will only be confirmed following the receipt of the physical. Your physician may substitute their own form.

Please contact the camp office if you have any questions.

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