City of Oak Ridge Summer Camp 2020

**Registration for 2020 Summer Camp begins on Wednesday, April 15!**

**Camp Info:**

* **Camp (ages 6-11)** will run for 8 consecutive weeks, Monday through Friday, beginning on June 1. (There will be no camp on Friday, July 3)
* Early drop off begins at 7:30 a.m. and late pick up is 5:30 p.m.
* Daily Activities will take place at the **Oak Ridge Civic Center**, **Bissell Park** and the **outdoor Municipal Pool**. Special Field trips will include: Tinseltown, Cedar Hill Park, Main Event, Knoxville Zoo, Tri-County Roll Arena, Wonderworks, Kentucky Splash Water Park and Cool Sports. Due to COVID-19 there may be trip cancellations and social distancing measures taken.
* Fees: **Oak Ridge Residents - $100 per week**, **Non-Residents - $105 per week**

**How to Register - Due to Recreation Center closure, there are two Registration Options available:**

* **Online**

<https://apm.activecommunities.com/oakridgerecandparks/Home>

* **Mail-In (Available until centers re-open and walk-in becomes and option.)**

**Must Complete the 4 attached forms (Registration Form, Camp Release, Camp Handbook, and Medication Administration) and mail with payment in the form of a check to:**

**City of Oak Ridge**

**Recreation & Parks Dept.**

**Attn: Summer Camp**

**P.O. Box 1**

**Oak Ridge, TN 37831**

**Please call 865-425-3450 or email** **jbohanan@oakridgetn.gov** **with any questions about how to register.**

**2020 Oak Ridge Summer Camp - Registration Form**

**General Questions:**

Camper Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate:\_\_\_\_\_\_\_\_\_\_\_\_\_

Camper T-Shirt Size: Youth Small Youth Medium Youth Large  **x**  Adult Small Adult Medium Adult Large

Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate names of Parents and/or Guardians authorized to pick-up child from camp (ID required at Pick-up)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate names of Friends or Family members authorized to pick-up child from camp (ID required at Pick up)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does participant have any medical issues including buy not limited to allergies, seizures, and hearing or vision loss? Yes No (If taking medication during camp hours please fill out the attached **Medication Authorization** form.)

Please describe in detail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does participant need additional accommodations related to behavior, communication, or mobility issues? Yes No

Please describe in detail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2020 Oak Ridge Summer Camp - Registration Form**

**\*\*\*Reminder: Campers must be between the ages of 6 and 11. Eight sessions of camp are offered. They will meet weekly, Monday-Friday, from 9am-4pm, with early drop-off beginning at 7:30am and late pick-up ending at 5:30pm.\*\*\***

**Please check below which week(s) of camp you would like to register your child for:**

 **6/1 – 6/5 6/8 – 6/12**

 **6/15 – 6/19 6/22 – 6/26**

 **6-29 – 7/2 (no camp Friday, July 3) 7/6 – 7/10**

 **7/13 – 7/17 7/20 – 7/24**

**Fees:**

**For City of Oak Ridge Residents, each individual week of camp is $100, for Non-Residents each week of camp is $105. Please include payment for all weeks of camp for which you are registering in the form of a check. Mail-in registration can be sent to:**

**City of Oak Ridge Recreation & Parks Department Attn: Summer Camp P.O. Box 1 Oak Ridge, TN 37831**

**2020 Summer Camp Consent and Release**

My child has been examined by a physician within the past 12 months and is found to be physically able to participate in the City of Oak Ridge Recreation and Parks Department Camp Programs, which may include physical activities requiring rapid and strenuous movement. Rules and supervision are utilized to prevent or reduce the likelihood of physical injury. However, injuries, including those to the muscle, skeletal, circulatory and nervous systems, can occur. I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, fully understand the risk of injury arising from my child's participation in the City of Oak Ridge Recreation and Parks Department Camp Programs and I accept that risk as a part of granting permission for my child's participation. I also grant permission for my child to participate in all field trips planned for the City of Oak Ridge Recreation and Parks Department Camp Programs. I, on behalf of my heirs, executors, assigns and administrators do hereby release and discharge the City of Oak Ridge and any and all of its agents, employees and servants, from any and all liability of every kind, character and description from and by reason of any injury suffered by my child that may arise while he/she is participating in and under the supervision of the City of Oak Ridge Recreation and Parks Camp Programs. It is also agreed that this is the full and final release for the injuries mentioned above, and for all other claims or demands I or my child will ever have or now have against the said City of Oak Ridge as a result of my child participating in its Camp Programs.

 I give permission and consent for the City of Oak Ridge, its representatives, and employees to take photographs and video of my child during camp session activities. I further authorize the City to copyright, use, and publish such photographs and videos in any medium; and I give permission and consent that any such photographs and/or videos may be published and used by the City of Oak Ridge for any lawful purpose including but not limited to illustration and promotion of the camp experience, camp programs, and the City in general. Published material may appear in print, online, and on television as well as on City-owned and operated social media accounts at any time in the future.

In case of an emergency, the City of Oak Ridge and/or its employees have my authorization to obtain emergency medical aid for my child. I agree to pay all medical expenses incurred as a result of my child's participation in the City of Oak Ridge Recreation and Parks Department Camp Programs.

I/We do hereby acknowledge that I/We have received a copy of and have read the Camp Program Policies, and agree to abide by the same policies.

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Oak Ridge City Camps Policies and Procedures Handbook**

**FEES**

–Fees are due at the time of registration. The weekly fee covers special events, crafts, snack, field trip admission, transportation, pool admission, and a tee shirt. Additional shirts are available for $8 each, while supplies last. The weekly fee is $100 for residents and $105 for non-residents.

**CANCELLATIONS**

–Refunds will be made to participants who notify the front desk one week in advance of the camp session they wish to cancel. A cancellation fee of $5/week will be charged for all cancellations.

**COVID-19**

-Due to COVID-19, multiple adjustments could be made to camp at any time. These could include limited registration, daily schedule alterations, trip cancellations, less weeks of camp, and/or any number of changes that staff feel are needed in order to operate camp safely.

**CAMPER'S ARRIVAL AND DEPARTURE**

**Youth Camp-ages 6-11**

-Campers must be checked in and out by a staff member upon entering and/or leaving the program facilities each day. **Campers cannot be checked in or out at a field trip location or the outdoor pool. If your child needs to be picked up early from camp, please inform staff at check-in that your child needs to stay back from the pool, please inform camper that they are supposed to stay at the Civic Center.** A child may be released **only** to the person(s) named on his/her registration form. **All adults picking up a child should be prepared to show an ID.** If parents wish to make changes to their child’s pick up list it must be done at the front desk. Regular camp hours are 9am – 4pm. Early drop off is available before camp beginning at 7:30am. There will be no supervision provided prior to 7:30am. **For the safety of your child, please do not drop off your child before 7:30am.** Late pickup is offered until 5:30pm, at which time, all camp staff must clock out. In case of an emergency that causes the parent to be late in the afternoon, please call ahead to inform the staff. Continued late pickups will result in overtime penalty fees.

**-Field Trips-Departure times for field trips must be adhered to in order to meet reservation requirements.** Some long distance trips may require an 8 a.m. arrival. Parents should make other child care arrangements for their child if they miss the departure time. Return times for day long field trips are planned for 4:00 p.m. However, there are sometimes unavoidable delays, especially when trips are planned outside of Oak Ridge.

**GUESTS**

–Due to our large enrollment, Oak Ridge City Camps cannot accommodate guests of campers.

**FOOD FOR CAMPERS**

–Children should always bring their lunch, drink, extra snacks if desired, and reusable water bottle from home, unless otherwise stated. Please send non refrigerated lunches. Microwaves are **not** available for campers. Visits to vending areas, will be limited to outdoor pool time, only.

-Vending drinks are $0.75 / can and $1.50 / bottle. (Vending machine prices are subject to change) A light snack will be provided each afternoon around 4:00. Other treats may be served as a part of an activity/event.

**CLOTHING & PERSONAL ITEMS**

-Comfortable clothing should be worn each day. Shorts/shirts should not extend beyond campers fingertips. Please no spandex/volleyball shorts or midriff tops.  **Camp T-shirts must be worn on all field trips**. Children are required to wear appropriate athletic shoes for outdoor and gym play. Socks are required on certain field trips. **PLEASE! NO SANDALS, CROCS OR FLIP FLOPS EXCEPT IN POOL AREA. Campers not complying with dress code will be asked to call parents to bring appropriate clothing/shoes when staff feel it is necessary.**

**-**During summer months campers are offered **t**he option of swimming at the Outdoor Municipal Pool whenever scheduling and weather permits. If the child chooses to participate, he or she should bring swimsuit, towel, and **sunscreen** every day, since campers sometimes go to the pool even on field trip days. Parents who do not want their child to go to the outdoor pool on a particular day should inform the staff at check in. Personal items should be labeled with the child's name and carried in a backpack or sports bag.

**DO NOT BRING TO CAMP** \*Wheeled backpacks. \*Large amounts of money. \*Toys/games etc. \*Electronic devices (except on field trip days) \*Cell phones

**HEALTH AND EMERGENCY**

–Camp staff needs to be informed of any and all medical conditions and allergies. Contact information should be kept up to date. The staff will authorize medical treatment in life-threatening situations. Parents or guardians will be informed immediately. A statement of consent to this policy must be signed by the parent/guardian at the time of registration.

-Children requiring medication need to have a completed Authorization for Medication Administration form on file while their child is attending City Camps. Medication Administration trained staff will collect any medications at the beginning of the day/camp. No campers will be allowed to keep any medication on their person, unless allowed for in accordance with the Authorization for Medication Administration form. All medications will be given according to a doctor’s written instructions. All medications (prescription, over the counter, inhaler, and epinephrine pen) must be brought to camp in their original packaging and must have the child’s name on it, the dosage needed and the administration details. Please do not put medications into pill organizers, etc. Leftover medication must be picked up daily.

**All Recreation and Parks Department summer staff are certified in Child and Adult CPR and First Aid.**

-Due to the nature of the activities offered during city camps, participants will spend several hours a day outside. Every effort will be made to see that children are protected from excessive sun. **Parents should see that sunscreen is applied to their child prior to the start of camp each day.** Children **must bring** their own sunscreen and will be encouraged to take responsibility for applying it. We recommend spray bottles and a stick applicator for the face. During summer months parents have the option to keep their child back from the pool if they would like to limit sun exposure. This is best asked when campers check-in for the day. Alternate activities are always provided for campers who choose not to swim during camp swim times.

-Dehydration is also a concern we look out for with our campers, and all participants are asked to bring drink bottles for use during camp. Water will be made available to all campers to refill their bottles throughout the day. Please remember to label with your child’s name.

**Special Needs Campers**

The City of Oak Ridge Camps try to accommodate all interested children. However, our camps are extremely active with a large number of transitions and sensory changes throughout the day. Children are expected to keep up and keep going. They must also be able to follow all directions, rules and expectations independently. Children must participate well with others and follow safety rules without adult prompts. For certain special needs our camps are wonderful, for others it may put the child in an unnecessary stressful situations which may cause unsafe camp conditions. Staff is responsible for the safety and well-being of all the campers and are unable to give total one on one care to individual campers. Please call to discuss your child’s particular needs.

***DISCIPLINE***

-The method of discipline used by our staff is positive reinforcement, time out, loss of privileges and suspension. When necessary, parents will be expected to help with the disciplinary process. Misbehavior may result in a write-up. Parents will be notified of the first write up. After the second write-up, a parent/staff conference will be scheduled to discuss a resolution. After three write-ups the child may be suspended from camp for a period of days, or permanently, depending upon the seriousness of the offense.

-Children and/or parents/guardians involved in fighting, verbal abuse of others, disregard for authority, sexual harassment or any activity that places themselves or others in danger may result in the camper/s being suspended from the program on the first offense. **No refunds** will be made to participants suspended from the program. Campers that are dismissed from camp programs will need to schedule a meeting with camp director before being readmitted into future camp programs.

***For more information please contact***:

Jennifer Bohanan

Recreation Program Supervisor/City Camps Director

865-425-3450

jbohanan@oakridgetn.gov

Please sign below acknowledging that you have read and reviewed the City of Oak Ridge’s City Camp policies and procedures handbook. Please return to the Front Desk at the Civic Center before your child starts city camp programs.

**Parent Print \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child Print \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_

**PROCESS FOR MEDICATION ADMINISTRATION WITHIN THE CITY OF OAK RIDGE SUMMER CAMP PRESCRIPTION AND NON-PRESCRIPTION MEDICATION (PARENT AND STAFF INFORMATION SHEET)**

1. Parent/guardian requests medication to be administered during the camp day.
2. Parent/guardian obtains “AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS” form.
	1. If medication dispensing less than two weeks, parent(s) will complete “AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS” form.
	2. If medication dispensing is beyond two weeks, prescribing physician must complete “AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS”
3. Parent will personally deliver to the camp the completed “AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS” form and medication in the appropriately labeled container. No more than one month’s supply will be stored. The principal’s designee will receipt the number of dosages received. You may ask pharmacist for a separate medicine bottle to keep at school.
4. Individual designated to dispense medication MUST receive medication in-service provided by Oak Ridge Schools’ Nurse PRIOR TO DISPENSING. Individual dispensing medication must follow STRICT camper identification procedures outlined in the in-service.
5. Campers will have a recent photograph attached to the “AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS” form to ensure proper identification.
6. Medication will be kept in a locked container until it is needed for dispensing. The locked container will be locked in a secure location for overnight storage.
7. Campers will be directed by their counselor to report to the designated area at the designated time to receive their medication. If a camper does not report, the person dispensing the medication will notify the camp director who will locate the camper in order for them to receive the medication. The person dispensing the medicine will inform the director of the camper who did not report for medication at the designated time.
8. The designated person dispensing the medication will document daily the time medication was taken. The designated person will sign his/her initials and the time medication is dispensed. If the camper is absent or does not receive medication that day, the record will be signed with an “A” meaning absent. A “no show” is not acceptable and the student must be located.
9. For campers receiving on-going medication, the director’s designee will remind the parent at least three (3) days before the supply lapses.
10. When medication regimen has been completed, the parent/guardian will remove the remaining medication from the camp.
11. Any changes in dosage time or amounts will require a new “AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS” form with directions from prescribing physician.

**NOTE: NO INDIVIDUAL MAY DISPENSE MEDICATION WITHOUT THE VERIFICATION OF SYSTEM WIDE NURSE AND APPROVAL OF DIRECTOR**

**AMAC – 2020**

**OAK RIDGE SUMMER CAMP - AUTHORIZATION FOR MEDICATION ADMINISTRATION DURING CAMP HOURS**

The medication administration policy of the City of Oak Ridge Summer Camp states: every effort should be made to avoid the necessity of children being given medication at camp. If under exceptional circumstances a camper is required to take medication during camp hours, only the camp coordinators or the director’s designee may assist the student. It is the parent/guardian’s responsibility to bring this medication to school and remove any unused medication when treatment is completed. (Prescription medication must have a proper pharmacy label. Non-prescription medication must be in a new **UNOPENED** container with current expiration date.) All medication shall be kept in a locked container. (Inhalers may be kept with student if noted by physician below. Parent and student must sign the Medication Exemption form.) **Written authorization is for the current camp year only.**

Medication to be given on a short-term basis (two weeks or less), prescription or non-prescription with adequate instructions provided, requires the **PARENT** to complete and sign.

Medication to be given longer than two weeks, the **PARENT** and **PHYSICIAN** portions on the form must be completed.

**TO BE COMPLETED BY THE PHYSICIAN OR AUTHORIZED PRESCRIBER**

CAMPER NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BIRTHDAY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SEX:\_\_\_\_\_

NAME OF MEDICATION:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ REASON FOR MEDICATION:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type of Reaction:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dosage:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Schedule (Time(s) of administration):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form of medication/treatment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Restrictions and/or important side effects (please check one): Yes None Anticipated

If Yes, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Storage Requirements: (Describe Below) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
The camper is both capable and responsible for assisted for self-administering this medication:

Yes, with supervised assistance No, camper **cannot** administer Student may carry this medication (Emergency meds only – Inhaler, Epi Pen, Benadryl Glucagon)

**Physician’s Signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ph#\_\_\_\_\_\_\_\_\_\_\_

**AMAC – 2020**

**TO BE COMPLETED BY PARENT / GUARDIAN**

It is understood that the medication is administered to the camper listed above solely at the request of and as an accommodation by the undersigned parent or guardian. I give permission for my child to be assisted with the medicine(s) described above at camp by authorized persons or permitted to medicate herself/himself as also authorized by me and the physician.

I give permission to the Oak Ridge Summer Camp to contact the prescriber for questions Yes No

I agree to release the City of Oak Ridge and its personnel from any liability arising out of the administration of the medication to the student. **I will assume full responsibility for any side effects and complications that my child may have as a result of taking this medication.**

**Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**THE FOLLOWING TO BE COMPLETED BY CAMP PERSONNEL**

Medication was received by: Camp Coordinator Camp Director  Assistant to the Camp DirectorRecreation Manager

Medication shall be kept by: Student Coordinator

**Signature of Camp personnel accepting medication:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AMAC – 2020**

 **THIS FORM IS NON-TRANSFERRABLE**