

## Beulah Beach Camp and Retreat Center

### Medication Authorization Form

All campers under the age of 18 who bring prescription or over-the-counter medications to camp require a Medication Authorization form on file. Please complete this form by parent or guardian and submit at registration at the NURSE TABLE. All medications including prescription and over the counter must be turned into the RN at registration. Inhalers must be listed, but camper can keep if needed with their supplies.

Over the counter: Submit in the original packaging for labeling and dosing.  
Prescriptions: Submit in the original pharmacy container with camper's name, dose and Frequency and expiration date.  
 Please do not submit unlabeled pills, pill organizer or other container for camper safety.

This form, the electronic registration and submitted meds will be reviewed with the RN at check- in for camper safety.

**THIS FORM IS NOT REQUIRED FOR CAMPERS NOT SUBMITTING MEDICATIONS.**

**Parent/ Guardian**

I, the legal parent/ Guardian of \_\_\_\_\_ (camper name)  
 Date of Birth \_\_\_\_\_, request that the RN administer the following medications to my child. I also authorize as needed the sharing of health information between the camp RN and the child's physician listed below. \_\_\_\_\_ (parents name)  
 DATE \_\_\_\_\_ Phone \_\_\_\_\_

MEDICATION	DOSE	TIME OF DAY	DIAGNOSIS

**EPI PEN ONLY**

ALLERGY \_\_\_\_\_ Has an EPI pen ever been needed? YES OR NO  
 All submitted EPI pens are brought to each meal.

**INHALER ONLY:**

Daily use: YES OR NO                      Rescue inhaler: YES OR NO

PHYSICIAN NAME: \_\_\_\_\_ PHONE \_\_\_\_\_