

*Please have this form completed and placed in a large gallon ziplock bag along with medications in their original containers and bring to check-in at Camp Geneva.*



## Medication Form

Medications must come in original bottles with name of medication, dosage and students name clearly labeled. There will be no exceptions! Students will not be allowed to keep any medication on their person. (This includes any and all over the counter medications including Tylenol and Motrin). With the increased number of students this is a safety and security risk if students keep meds. Know that the camp nurse will have Motrin, Tylenol, antacids and other miscellaneous medications available. If a student needs a medication they can come see the nurse at any time to get a one time dose.

This is NON NEGOTIABLE and for the safety of all students. Please reach out to Julie Haveman, [julie.haveman@harborchurches.org](mailto:julie.haveman@harborchurches.org) with any questions or concerns you have.  
Please write legibly.

**Student Name** \_\_\_\_\_

**Parent Name** \_\_\_\_\_ **Cell#** \_\_\_\_\_

### Time of day medication taken:

Medication & Dosage	AM (breakfast)	Noon	PM (dinner)	Bedtime

**Allergies (i.e. bee stings, peanuts, seasonal)**

\_\_\_\_\_

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