

CAMPER HEALTH HISTORY-DAY CAMP
Please Print This Form



Cool Meadows Farm
3811 Jarrettsville Pike
Jarrettsville, Md. 21084
410-557-7442

Child's name: _____

The following information is required for a camper to be admitted to day camp:

CAMPER IMMUNIZATION INFORMATION

All campers must be current on all immunizations, see www.EDCP.org (Immunization).

1. Provide date (month and year) of camper's last tetanus (or DTP) shot:
2. Is the camper currently enrolled in a Maryland school, public or private?
 - YES, provide name of Maryland school:
 - NO, provide a copy of immunizations confirming that the child has received all immunizations as required by the Maryland DHMH Recommended Childhood Immunization Schedule. See www.EDCP.org (Immunization) for information.
3. Is the camper exempt from any immunization on medical or religious grounds?
 - YES, provide a signed copy of Maryland Department of Health and Mental Hygiene Immunization Certificate from either a licensed physician indicating that the immunization is medically contraindicated, or the parent or guardian indicating that they object to immunizations for religious reasons.

CONTACT INFORMATION:

Parent or Legal Guardian: _____

Phone: _____

Emergency Contact Person: _____

Phone: _____

