

Camp Augusta Medical Agreement

This form is to be filled out by a teacher, administrator or lead group organizer.

ONE signed copy is needed for each visiting group. It is not meant for every child's guardian to fill out. It is the responsibility of the person signed below to ensure that all adult chaperones are aware of their medical responsibility.

Dates of attendance: _____

I, _____, on behalf of _____ (school/organization name) agree to the following terms regarding medical treatment and care for students/youth while they are in attendance at Camp Augusta during the dates noted above.

- 1) Licensee (_____) shall be solely responsible for any and all medical care and decisions regarding seeking and providing medical care beyond basic first aid to campers while they are on site. Many Camp Augusta staff are certified to provide basic first aid but all decisions and responsibility for further care will be with the Licensee.
- 2) All medications, both routine and supplemental, will be the responsibility of the adult chaperones provided by the Licensee. Camp Augusta takes no responsibility for the decisions regarding medications made by the Licensee. The Licensee may use over-the-counter medications stocked at Camp Augusta, if they are available. A list of medications we typically (no guarantees) have on hand is available at the bottom of this document with but it is the responsibility of the Licensee to determine appropriateness of use and student allergies. Camp Augusta suggests that the Licensee bring an adequate supply of any medications they feel may be necessary as we may not have it in stock.
- 3) It will be the responsibility of the Licensee to contact parents or guardians regarding any injuries while on site and to procure transportation to emergency facilities if deemed necessary by either the Licensee or the parent/guardian. Camp Augusta is not responsible for this determination or providing transportation.
- 4) Any condition, either medical or behavioral, that requires a higher level of supervision by the Camp Augusta staff must be brought to the attention of Camp Augusta within a reasonable timeframe, preferably 1 month prior to the date of attendance. As further information is deemed necessary to support the camper's needs, Camp Augusta will need to acquire it. Camp Augusta will provide for reasonable adaptations to the program for these students as available. Exemptions for individual students, upon discussion with the Licensee and Camp Augusta, does not change the responsibilities noted in the above points for all other students attending.

These medications, usually stocked in the Camp Augusta health center, are used to manage illness or injury.

Acetaminophen (Tylenol)
Ibuprofen
Benadryl
Calamine lotion

TUMS
Antibiotic ointment
Medicine bite swabs

As the signatory, I have the full authority of _____ (school/organization) to sign and make decisions of this nature.

Printed Name _____

Date _____

Signature _____

Title _____