



331 Mt. Misery Road, Melville, NY 11747 • (631) 692-6990 • driftwooddaycamp@gmail.com

## HEALTH CARE PACKET CHECKLIST

- **Health History (Green) Form 2018** completed and signed by parent.
- **A copy of your child's Medical Insurance Card** (Both front and back).
- **Medical Exam (Gold) Form 2018** completed and signed by physician.
- **Request for Medication to be Administered at Camp (Blue) Form** must be signed by **BOTH** parent and physician. Medication dosage must be instructed as daily or as needed. **Please note, this form is only to be used if your child takes prescription or over-the-counter medication(s) while at camp.**
- **EpiPen Procedure** (for review)
- **Standing Order (Yellow) Form** for every **Pre-Teen and Teen Travel Campers** **MUST** be completed by a parent and signed by both a parent and physician.
- **Camper Profile (Purple) Form** both front and back completed by parent.
- **Emergency Contacts and May Take (White) Form** completed by parent.

Please send entire packet of forms together **BEFORE MARCH 1st** to:

Driftwood Day Camp  
1191 Old Country Road  
Plainview, NY 11803

Or email the forms to:  
driftwooddaycamp@gmail.com

**\*\*If there are any medical concerns,  
please email nursekelly@driftwooddaycamp.com\*\***



*The Only Camp Named Best Camp on Long Island Nine Years in a Row!*

