CHUMS MEDICAL INFORMATION FORM

This form should only be completed if you would like to provide further information surrounding a medication condition for your child when registering your child onto the camp. Boxes are provided to give specific details on the name of medication, symptoms, treatment and if there is anything staff should know around the planning of activities. We always recommend that if you have any concerns, you speak to the Camp Coordinator or Manager directly. Please don’t hesitate to e-mail chums@essex.ac.uk or speak to a member of staff on the day of the camp.

Childs Name:

Childs Medical Condition:

Name of Medication Child is on:

Does your child require this medication to be administered to them during their time at CHUMS (Please circle):

YES NO

*If you circled yes and your child requires medication at CHUMS, you will need to fill out the ‘****Prescribed Medication Form’*** *and address this to our Camp Manager with a detailed description of administration instructions, dosage and your permission for this to occur at CHUMS.* ***Please note that medicines and other items should be clearly labelled with your child’s name and the exact dosages and times of application and should be handed to the Camp Coordinator when you arrive****.*

Symptoms of child’s medical condition:

Treatment for child’s medical condition

Does your child’s medical condition restrict them from any activities offered at CHUMS? If so, which one/one’s?

Please provide us with any further information you feel will be beneficial for the CHUMS know about your child’s medical condition:

In the event of any illness/accident, I give consent for any necessary medical treatment can be administered to my child, which may include the use of anaesthetic.

Parents/Guardian’s Name:

Signed:

Date:

**MEDICAL NOTES** *(for parents/guardians to read)*

**Medical Information Form**

The Camp Coordinator holds a copy of each child's medical details and emergency contact telephone numbers on the application form. Parents should inform the CHUMS coordinator/manager of any changes as that occur so that our records remain up to date.

**Important Checking Points** *(for staff to read)*

* On a confidential and needs to know basis, communicate any information to CHUMS Playworkers that will be beneficial to know before the commencement of activities.
* Ensure any medication is stored safely and is correctly labelled (i.e name, dob, right dose/medication)
* Speak to CHUMS Coordinator if unsure of anything.