

## CAMP HAZE

### CHECK LIST

Please check off each item you are enclosing before sending your forms back to us (include this check list).

Camper's Name \_\_\_\_\_

<b><u>General Information</u></b>	
<input type="checkbox"/>	Camp Application (6 pages) - completed - <b><i>RETURN IMMEDIATELY</i></b>
<input type="checkbox"/>	Photo attached on page 3
<input type="checkbox"/>	<b><i>Signed by parent/guardian</i></b> on page 6
<input type="checkbox"/>	Release Form - completed and <b><i>signed by parent/guardian</i></b>
<input type="checkbox"/>	Behavior Form - <b><i>signed by parent/guardian and camper</i></b>
<b><u>Medical Information</u></b>	
<input type="checkbox"/>	Medical Form - completed and <b><i>signed by physician</i></b>
<input type="checkbox"/>	Physical History - completed and <b><i>signed by parent/guardian</i></b>
<input type="checkbox"/>	Insurance card
<input type="checkbox"/>	Prescription card
<input type="checkbox"/>	Catskill Medical Center Authorization - completed and <b><i>signed by parent/guardian</i></b>
<input type="checkbox"/>	Transport Form

**Please make copies of this list and all the forms for each new camper.  
(New campers must be between the ages of 7 and 12).**