

Health History and Examination Form for Youth Attending Carthage Soccer Camp

The information on this form is not part of the camper or staff acceptance processes, but is gathered to assist us in identifying appropriate care. This form is to be filled in by parents/guardians of minors or by adults themselves.

***It is important to copy your insurance card for each child (front & back) to be sent in as well.**

***Send this form, along with the Assumption of Risk form, to the Address below**

Name _____ Birth date _____ Age at Camp _____

Home Address _____

Social Security number of camper _____ Gender: Male Female

Custodial parent/guardian _____ Phone: _____

Home address _____
(if different from above)

Business address _____ Phone: _____

Second Parent or guardian or emergency contact _____

Address _____ Phone: _____

Business Address _____ Phone: _____

If not available in an emergency, notify:

Name _____

Relationship _____ Phone: _____

Address _____

***Any specific medical conditions we should be aware of please include below, (i.e. allergies, reaction to latex gloves, asthma, medication.....)** _____

Permission to Provide Necessary Treatment or Emergency Care:

I hereby give permission to the medical personnel selected by the camp director to order X-rays, routine tests, treatment, to release any records necessary for insurance purposes, and to provide or arrange necessary related transportation for me/or my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to secure and administer treatment, including hospitalization, for the person named above. This completed form may be photocopied for trips out of camp.

Signature of parent or guardian or adult camper/staffer _____

Witness _____ Date _____

I also understand and agree to abide by the restrictions placed on my camp activities.

Signature of minor or adult camper/staffer _____ Date: _____

Steve Domin-Carthage College Soccer Camp
2001 Alford Park Drive
Kenosha, WI 53140