

Camper Health Check

To be completed within 24 hours of camper's arrival at Camp Onas
PLEASE DO NOT MAIL TO CAMP--BRING THIS WITH YOU ON CHECK-IN DAY

Dear Camper Parent or Guardian,

Keeping everyone at Camp Onas healthy is important to us, and we need your help to make sure every child arrives at camp healthy and ready to participate in our program.

There are a few things that we ask that you do at home before your child comes to camp:

1. Please examine your child for any indication of head lice. For information on how to do this, visit the Center for Disease Control website: **www.cdc.gov**.
2. Inspect your child's bedding for any signs of bedbugs. (The CDC also has information on this).
3. Let us know if your child has come in contact with any communicable diseases in the two weeks prior to coming to camp.
4. Please call us before bringing your child to camp on check-in day if your child has had a fever or infectious bug in the last 24 hours.
5. Please submit your child's health form by June 1st so that our staff has time to review it. **We will not accept campers on check-in day if we have not had time to review it.** A \$35 late fee will be assessed for forms received after June 1st.
6. Be sure to pack sunscreen and insect repellent; check that the insect repellent is effective against ticks and please review/ practice how and when to apply with your child. We also recommend pre-treating some of your camper's clothing with permethrin, a long-lasting tick repellent.

Our goal in all this is to keep your child and everyone else at camp safe and healthy. We want to be proactive with you in prevention and detection of anything that could hinder our campers' experience. Thank you for your help.

Please fill out the bottom of this page and bring it with you to camp at your child's Check-In. (Please do not mail it to Camp). Call us at 610-847-5858 if you have any questions.

Camper Name _____ Parent Name _____

Session _____ Date Camper checked by Parent _____

I have checked my camper and he/she was free of head lice.

Yes

No If no, date of treatment: _____

I have checked my camper's bedding and it is free of bedbugs.

Yes

Has your camper been exposed to any communicable diseases in the last two weeks? If "Yes," please explain:

Yes

No

Has your camper experienced fever, vomiting, diarrhea, sore throat, coughing, or other symptoms in the past 24 hours? (If yes, please call the Health Center before coming to camp).

Yes

No