



YMCA Camp MacLean 2024 Winter Camp Medication Form

This form is to be turned into the Health Care Manager along with all medications brought to camp.

1. All medications MUST be in the original containers with the original labels. Keep all prescription medications in a pharmacy container properly labeled with prescription number, medication name, doctor, pharmacy address and telephone numbers. The camp RN cannot distribute any medication that is not in its original container and properly labeled. Do not send pillboxes.
2. Please complete the following form answering as completely as possible.

Name of Camper _____

Medication Name _____

Directions for taking medication. _____

Additional Information on medication use, side effects, etc. _____

Medication Name _____

Directions for taking medication. _____

Additional Information on medication use, side effects, etc. _____

Medication Name _____

Directions for taking medication. _____

Additional Information on medication use, side effects, etc. _____

Please call the camp office for any questions at 262-763-7742.
Return this form to the Camp office at 31401 Durand Ave, Burlington WI 53105.