

**Staff Physical Information Form**  
**email to (robinshome@aol.com) at least 2 weeks prior to your camp start date.**

**CVL PHYSICAL FORM**

We will accept your Doctor's Physical Form also, as long as it was completed within 12 months of the camp session.

**Please keep a copy for your records.**

Staff Full Name: \_\_\_\_\_

Medical Personnel: Please Attach any additional information if needed.

**TO BE COMPLETED BY A LICENSED PHYSICIAN:**

I have examined: Name \_\_\_\_\_ Date of Exam: \_\_\_\_\_

Last First Middle

Height \_\_\_\_\_ Weight \_\_\_\_\_ Blood Pressure \_\_\_\_\_ Pulse \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

**PLEASE CHECK YES OR NO. EXPLAIN ALL 'YES' ANSWERS IN FULL**

Is the applicant under the care of a physician for any condition(s)? Yes No \_\_\_\_\_

Is the applicant undergoing treatment at this time for any conditions: Yes No \_\_\_\_\_

**Medications:** No medications Will take the following prescribed medications while at camp: (include name, dose, frequency)

**Diet, Nutrition:** Eats a regular diet Has a medically prescribed meal plan or dietary restrictions: (describe below)

Has there been any reported loss of consciousness, convulsion, or concussion? Yes No \_\_\_\_\_

Does applicant have epilepsy? Yes No \_\_\_\_\_

Does applicant have diabetes? Yes No \_\_\_\_\_

Any treatment to be continued at camp? Yes No \_\_\_\_\_

Any allergies (food, drugs, plants, insects, etc.)? Yes No \_\_\_\_\_

Activities to be encouraged or limited? Yes No \_\_\_\_\_

Additional Health Information: Yes No \_\_\_\_\_

**In my opinion, the above candidate:  Is  Is Not able to participate in an active camp program which may include swimming, canoeing, climbing, and other strenuous activities.**

Licensed Physician's Signature \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Print Physician's Name \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Date of Completion \_\_\_\_\_ By: \_\_\_\_\_

\*Initial if completed by nurse or physician's assistant

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_