



2010 WESTERN TRIP FORMS CHECKLIST

<u>MANDATORY</u>	<u>DUE DATE</u>
<input type="checkbox"/> TAMARACK CAMPS MEDICAL FORM	5/1/2010
<input type="checkbox"/> COPY OF HEALTH INSURANCE CARD	5/1/2010
<input type="checkbox"/> CAMPER INFORMATION FORM	5/1/2010
<input type="checkbox"/> CAMPER AGREEMENT	5/1/2010
<input type="checkbox"/> POLICY FOR SENDING CAMPERS HOME	5/1/2010
<input type="checkbox"/> BIKING WAIVER	5/1/2010
<input type="checkbox"/> RAFTING WAIVER	5/1/2010
<u>AS NEEDED</u>	
<input type="checkbox"/> MEDICATION INFORMATION FORM	6/1/2010
<input type="checkbox"/> MEDICATION INFORMATION TO CAMPRX.COM	6/1/2010
<u>OPTIONAL</u>	
<input type="checkbox"/> RESTRICTED DIET AUTHORIZATION	5/1/2010
<input type="checkbox"/> PARENT EMERGENCY CONTACT FORM	5/1/2010
<u>ADDITIONAL POSTED INFORMATION</u>	
PARENT GUIDE	
CAMP RX INFORMATION	
PERSONAL EQUIPMENT GLOSSARY AND EQUIPMENT LIST	
SUPER SAVINGS COUPONS	
TAMARACK FAMILY FUN DAY INFORMATION	
BUNK 1 INFORMATION	