

# WELLNESS INFORMATION

By answering the questions below, we can best support you to ensure a fun, safe and educational at-camp experience!

Name of Participant \_\_\_\_\_  
Age of Participant \_\_\_\_\_  
Emergency Contact Name \_\_\_\_\_  
Relationship to Participant \_\_\_\_\_  
Emergency Contact Phone # \_\_\_\_\_

It is our priority to create an inclusive environment at camp for all campers, staff and visitors. We work diligently to address issues as they arise that challenge the inclusion of all. It is our expectation that campers and staff are inclusive to their peers and all other participants in our camp community.

## DIETARY REQUIREMENTS

Do you have any dietary requirements?

- Halal       Lactose-Intolerant       Vegetarian       Vegan       Gluten-Intolerant  
 No Pork       Other: \_\_\_\_\_

## ALLERGIES

FOOD ALLERGIES (ie. nuts, eggs, shellfish, etc.)	REACTION (ie. rash, hives, etc.)	LIFE THREATENING?		TREATMENT (ie. EpiPen, benadryl, etc.)
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	

IF YOU SELECTED "YES", A MEMBER OF OUR TEAM WILL FOLLOW UP WITH YOU TO ENSURE YOUR NEEDS ARE MET DURING YOUR TIME AT CAMP.

Note: Tims Camps are "allergy aware" facilities. We do not serve any products that contain nuts. Many products we serve "may contain" traces of nuts. If your allergy is severe, and you cannot ingest "trace nut" products, or your allergy is airborne, our Food Services team will alter the menu to ensure the risk of exposure is minimized.

OTHER ALLERGIES (ie. latex, bees, hay fever, etc.)	REACTION (ie. rash, hives, etc.)	LIFE THREATENING?		TREATMENT (ie. EpiPen, benadryl, etc.)
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	

IS THERE ANYTHING THAT WOULD LIMIT YOUR ABILITY TO FULLY PARTICIPATE IN ALL CAMP ACTIVITIES?  Yes  No

If yes, please explain: \_\_\_\_\_

IS THERE ANY ADDITIONAL INFORMATION THAT YOU WOULD LIKE TO SHARE?

ARE YOU PART OF A POPULATION WHERE YOU REQUIRE SPECIFIC ACCOMMODATIONS?  Yes  No

IF YOU SELECTED "YES", A MEMBER OF OUR TEAM WILL FOLLOW UP WITH YOU TO ENSURE YOUR NEEDS ARE MET DURING YOUR TIME AT CAMP.

**VACCINATIONS**

- All up to date
- Not up to date
- Tetanus shot Date of last Tetanus shot: \_\_\_\_\_
- COVID-19 vaccination (2 doses) Date COVID-19 vaccinations completed: \_\_\_\_\_
- Does not get vaccinated

Vaccination notes: \_\_\_\_\_

Note: It is the responsibility of the group organizing the trip to provide designated medical staff. Designated medical staff will provide first aid and dispense and administer routine medications for their participants. Tims Camps provides food services and programming opportunities and requires the above information to ensure a successful experience. It must be understood that failure to complete and submit accurate information may enhance the risk of injury to the participant.

