



Needham Soccer Club Summer Clinics Parent/Camper Packet

Dear Parents/Guardians:

Welcome to Needham Soccer Club Summer Clinic. Thank you for choosing NSC for your families Summer soccer experience. As a summer clinic operator we are required by law to comply with board of health regulations and require all participants to complete the following paperwork before your child can participate in an NSC Summer Clinic. Our goal is to provide a first class soccer experience for your child, with the safest environment possible, please help us better serve your family by providing detailed answers and providing all required documentation.

NSC Summer Camp documentation checklist, please check off each item when complete, and before uploading.

_____ Child/Parent Information

_____ Emergency Contacts and Medical Consent

_____ Pick-up authorization/Emergency Contact and Release forms

_____ Report of a Physical Examination (within the 18 months preceding the clinic start date)

_____ A Certificate of Immunization

_____ Authorization for medication form (if applicable)

REMINDER TO ALL PARENTS/GUARDIANS

Each child must be examined by a physician prior to enrollment, as required by the Commonwealth of Massachusetts. Included with this physical should be an immunization history. Each child must be immunized prior to entrance to an NSC Camp. Please be sure that your child's immunizations are up to date at the time of entrance into the program. If NSC does not have your child's physical and immunization records before the start of the camp week, entrance will be denied until records are received.

Our staff are available to assist in making this the most enjoyable experience for your family, if you have any questions or need assistance filling out forms, contacts us at admin@needhamsoccer.com. We are looking forward to a great clinic of fun, soccer and development for all our campers.

Thank you
Needham Soccer Club



**Needham Soccer Club Summer Clinics
Child & Parent/Guardian Information**

CHILD INFORMATION

Child's Name: _____

CHILD'S ID INFORMATION

Eye Color: _____ Hair Color: _____ Sex: _____

Height: _____ Weight: _____ Skin Color: _____

Identifying Marks: _____

PARENT/GUARDIAN INFORMATION

PRIMARY CONTACT

Parent/Guardian Name: _____

Cell Phone #: _____

Home Phone #: _____

Home Address: _____

Bus. Name: _____

Bus. Address: _____

Bus. Phone #: _____

Work Hours: _____

SECONDARY CONTACT

Parent/Guardian Name: _____

Cell Phone #: _____

Home Phone #: _____

Home Address: _____

Bus. Name: _____

Bus. Address: _____

Bus. Phone #: _____

Work Hours: _____

MEDICAL INFORMATION

Child's Physician: _____ Clinic: _____

Tel. #: _____

INSURANCE INFORMATION

Insurance Carrier/Health Plan: _____

Policy Number: _____ Tel. #: _____



**Needham Soccer Club Summer Clinics
Child & Parent/Guardian Information**

MEDICAL INFORMATION (continue)

Has/Does you child have: (please circle)

Frequent ear infections:	YES	NO
Heart trouble:	YES	NO
Headaches:	YES	NO
Diabetes:	YES	NO
Asthma:	YES	NO
If yes (asthma), will they have an inhaler)	YES	NO
Diagnosed with ADD/ADHD:	YES	NO
Learning Disabilities:	YES	NO
IEP:	YES	NO
Skin Problems:	YES	NO

If you answered yes to any of the above questions please give a detailed explanation: _____

Please list all allergies: _____

For each allergy, please give a detailed explanation about the causes, symptoms, reactions and treatments? _____

Please list any other medical conditions that we should know about: _____

Will NSC be administering medication during the camp day?

NO

YES

If yes, please make sure to fill out the consent form.



Needham Soccer Club Summer Clinics Administration of Medication Consent

Please fill out this form if NSC will be administering medication to your child during the camp day

Child's Name: _____

In accordance with Massachusetts State Law, NSC policy on the administration of medication is as follows:

- Medication must arrive in the prescription container with the date, dosage, and the doctor's name.
- A parent must sign the medication permission form, writing the purpose of the medication, the date, and times of administration, and the amount given.
- Medication must be handed directly to the camp director, not left in the child's lunch box or equipment bag.

NSC will not administer the following:

- Non-prescription drugs (unless authorized by the parent/guardian and a medication permission form is completed).
- Medication is not contained in the prescription package. Single tablets or jarred liquid will not be administered and will therefore be sent home.
- Medication in any amount exceeding the dosage indicated on the bottle

If you require more room, please attach a separate sheet

	Medicine	Route (oral, topical, etc)	Dose	Time	Refrigeration	
1					Y	N
2					Y	N
3					Y	N
4					Y	N

Special Instructions: _____

Does your child have any difficulty taking medications? YES NO If Yes, please describe: _____

I hereby authorize NSC to administer the above named medications to my child, in accordance with Board of Health regulations 105 CMR 430.160.

Signed: _____ Print Name: _____ Date: _____



Needham Soccer Club Summer Clinics Administration of Medication Consent

Please fill out this form if NSC will be administering medication to your child during the camp day

BOARD OF HEALTH REGULATION FOR ADMINISTERING MEDICATION DURING CAMP HOURS

105 CMR 430.160 (A)

Medication prescribed for campers shall be kept in the original containers bearing the pharmacy label, which shows the date of filing, the pharmacy name and address, the filing pharmacist's initials, the serial number of the prescription, the name of the patient, the name of the prescribing practitioner, the name of the prescribed medication, directions for use and cautionary statements, if any, contained in the original containers containing the original label, which shall include the directions for use.

105 CMR 430.160 (C)

Medication shall only be administered by the health supervisor* or by a licensed health care professional authorized to administer prescription medications. The health care consultant shall acknowledge in writing the list of medications administered at the camp. If the health supervisor is not a licensed health care professional authorized to administer prescription medications, the administration of medications shall be under the professional oversight of the healthcare consultant. Medication prescribed for campers brought from home shall be only administered if it is from the original container, and there is written permission from the parent/guardian.

105 CMR 430.160 (D)

When no longer needed, medications shall be returned to a parent or guardian whenever possible. If the medication cannot be returned it shall be destroyed.

**Health Supervisor - A person who is at least 18 years of age, specially trained and certified in at least current American Red Cross First Aid (or its equivalent) and CPR, has been trained in the administration of medications and is under the professional oversight of a licensed health care professional authorized to administer prescription medications.*



Needham Soccer Club Summer Clinics
Emergency Medical Treatment Consent and Pick-Up Authorization

AUTHORIZATION AND CONSENT FORM

As the parent or legal guardian of _____ I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for child. However, if I cannot be reached, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of medicine. This care may be given under any conditions whatsoever to preserve the life, limb, or well-being of my child or dependent.

I understand the staff member of NSC are trained in the basics of First Aid and i authorize them to give my child First Aid when appropriate.

Signature:: _____ Print Name: _____

Date: _____

EMERGENCY CONTACT AND RELEASE FORM

In case of emergency, please give names of persons who can be called and are authorized to pick up your child if we cannot reach a parent (please attach another sheet if more room is needed)

PICK-UP AUTHORIZATION: At camper sign-out, I authorize the following people to pick up my child from camp. (For your child's safety, a photo ID is required each and every time your child is picked up).

Name: _____ Relationship to Child: _____ Tel. #: _____

Address: _____ Emergency Contact (Y/N): _____

Name: _____ Relationship to Child: _____ Tel. #: _____

Address: _____ Emergency Contact (Y/N): _____

Name: _____ Relationship to Child: _____ Tel. #: _____

Address: _____ Emergency Contact (Y/N): _____

Name: _____ Relationship to Child: _____ Tel. #: _____

Address: _____ Emergency Contact (Y/N): _____



Needham Soccer Club Summer Clinics Emergency Medical Treatment Consent and Pick-Up Authorization

NOT AUTHORIZED TO PICK-UP:

1) _____ 2) _____

HEALTH POLICIES AND GUIDELINES

NSC does have a healthcare consultant on call. Our consultant has advised us on our health policies, and will always be available to advise us in both acute and chronic medical situations. As part of our health care policy, NSC cannot accept any child with a diagnosed communicable disease (measles, mumps, chicken pox, etc). Please do not send your child to an NSC Camp/Clinic if he/she shows signs of possible contagious diseases (new cold, sore throat, fever, rashes, diarrhea, vomiting, etc). NSC does not have sufficient staff or facilities to care for sick children. A parent should not bring their child to our camp if he/she is too ill to participate in activities, if the child requires special attention due to their illness, or if any signs of poor health are evident. The health of all children and staff is in jeopardy if an ill child is allowed to attend. Parents must notify the staff if their child has been exposed to an infectious disease, so we can alert the families of the children attending the program. If during the day NSC staff notice a child is unable to participate in activities due to poor health, the parent will be called to come and pick up the child. If a parent cannot be reached, an emergency contact will be called. It is the responsibility of the parent to notify NSC if there should be any changes regarding emergency number or contacts. If you decide that your child should remain home, please contact admin@needhamsoccer.com to inform of the absence.