

**Berwick Boys Foundation**  
**Attachment to ACA Health Form:**

**Permission to Self-Administer Emergency Medication** - To be signed by the Camper's Primary Healthcare Provider and Parent/Guardian, only if applicable.

It is the policy of the Berwick Boys Foundation to keep all medications for campers in the Infirmary and for the Nurse on our staff to dispense them, usually at meal times.

If your son is required to carry and self-administer emergency medications, we require you and your son's physician to sign off on this form in order to allow us to comply with Maine Camping Regulations:

Emergency Medications include, but are not limited to, an asthma inhaler or an epinephrine pen.

\_\_\_\_\_ (name of camper) is required to self-administer  
\_\_\_\_\_ (specify emergency medication). By signing below, I verify  
that the camper has adequate knowledge and skill to safely self-administer the above referenced  
emergency medication.

Signed \_\_\_\_\_ (Parent/Guardian)                      Date \_\_\_\_\_

Signed \_\_\_\_\_ (Primary Care Provider)                      Date \_\_\_\_\_