



# CITY OF LAUREL POLICE DEPARTMENT

811 Fifth Street, Laurel, Maryland 20707 • Phone (301) 498-0092 • Fax (301) 498-8003

## Cops Camp Medical Information

Child's Name: \_\_\_\_\_

Health Insurance: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Doctor's Number: \_\_\_\_\_

**Allergies:** \_\_\_\_\_

\_\_\_\_\_

**Is your child required to carry an EpiPen?** Yes \_\_\_\_ No \_\_\_\_

Medication: \_\_\_\_\_

\_\_\_\_\_

**Special Needs Child:** Yes \_\_\_\_ No \_\_\_\_

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

\_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

**Emergency Contact Number:** \_\_\_\_\_

**Guardian Signature:** \_\_\_\_\_