



I, \_\_\_\_\_, give permission to the staff of Camp  
Parent/guardian name (please print)  
Nutimik to administer an epi-pen to my child \_\_\_\_\_

*if it is deemed necessary by the staff to do so. I understand that the staff have received a brief training session on the use of an epi-pen and that a Registered Nurse will be on the Camp Nutimik grounds at all times.*

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness