

Day Camp First Aid Report

Please record every incident where first aid was administered to any camper. Provide the information requested below. Indicate if no treatment is given. In an emergency, follow the procedures for emergencies as outlined in the Day Camp Director Manual. Notify GSMW Headquarters of any illness/injury that is taken to a physician/hospital. Use the given name, not camp names. Retain a copy for seven years. After day camp, submit the original copy to GSMW through customercare@gsmw.org.

Camp Location:			Dates of camp:		
First Aic	l provider:		1		
Date	Patient's Full Name	Injury/ Reported Illness	Treatment	Time	First Aider