



**Newtown Township Parks & Recreation**  
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Email: [Recreation@NewtownPA.gov](mailto:Recreation@NewtownPA.gov)  
Township Website: [www.NewtownPA.gov](http://www.NewtownPA.gov)  
Recreation Website: [www.NewtownFun.com](http://www.NewtownFun.com)

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## 2025 Camper Medication Form

Camper Name: \_\_\_\_\_

Camp: \_\_\_\_\_

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

Dosage: \_\_\_\_\_

Strength: \_\_\_\_\_

Time to administer:

\_\_\_\_\_

Frequency of medication:

\_\_\_\_\_

Special Instructions/conditions to observe:

\_\_\_\_\_

\_\_\_\_\_

**Medication must be packaged in the properly labeled pharmacy container, in a plastic bag with the child's name. The information above must match what is on the prescription bottle. Medication must be dropped off by the parent/guardian to the Camp Director or to the Parks & Recreation office. All medications left at camp after August 9 will be discarded, no exceptions.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**