

Does the scholar carry an EpiPen?	☐ Yes ☐ No
EpiPen stored with:	
Other emergency medication:	
Dosage / Instructions:	

Parent/Guardian Signature

Date

Printed Name

FIVE HORSEMEN NONPROFIT, INC.

STEM, Leadership & Academic Literacy Day Camp

July 22–25, 2026 | YMCA of Metro Atlanta Leadership & Learning Center

FORM 2C

MEDICATION AUTHORIZATION FORM

Required for any prescription or over-the-counter medication to be administered by camp staff.

SECTION A — SCHOLAR & GUARDIAN INFORMATION

Scholar's Full Name:	
Date of Birth:	
Parent/Guardian Name:	
Guardian Phone (reachable during camp):	

SECTION B — MEDICATION DETAILS

List all medications to be administered by camp staff. All medications must be in the original labeled container. Prescription medications require the dispensing pharmacy label. DO NOT send medications in unlabeled containers.

#	Medication Name	Dosage	Frequency / Time	Rx or OTC?	Special Instructions
1					
2					
3					