2009 Kids Breakaway

Medical Departure Update

Church/City _____ Group Leader_____

- Please have your qualified personnel perform a head lice check on every child before leaving the church
- Please have every parent/guardian update any medical information since the application date.
- **PLEASE bring this medical update to Breakaway with you.**

Child's Name	Head/Lice Check	Please list any change in medical information or medication since making camp application.

If more space is needed, please attach a separate sheet or make copies of this page.