

This form **MUST be turned in by pre-camp**. If you have changes in health by band camp, you can: 1. **Mail** it to the Band Boosters PO Box or 2. **Bring** it to camp with you on your first day. You cannot participate if we do not have your health form on file.

## 2024-2025 Richmond High School RHS Band Health Form

If there are changes in your health history, we should be aware of, at any time download additional forms are available at <http://bluedevelopmusic.weebly.com/rhs-marching-band.html> and return it at camp or ASAP.

Today's Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

### Emergency Contact Information

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

Phone #: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Please list any allergies to medication:

\_\_\_\_\_  
Please list any other allergies, including food: (if your student is allergic to bees, please send an EpiPen to camp with him/her)

\_\_\_\_\_  
Please list anything else about your student's health we should know:

\_\_\_\_\_  
In the event of an emergency and no one can be immediately contacted, please sign below, giving permission for your son/daughter to receive medical treatment.

\_\_\_\_\_  
*Parent/Guardian Name*

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

If you would like to mail it:  
RICHMOND BAND BOOSTERS  
PO BOX 611  
RICHMOND, MI 48062