

Camp Kawanhee Camper Forms

FORM NAME	FORM DUE DATE
Camper Travel	June 1
Parent Questionnaire	June 1
Camper Health Form	May 1
Health Care Recommendations by Licensed Medical Personnel	May 1
Permission Form for Self Administering Medication	May 1
Permission Form	June 1

Please return forms by the above indicated dates to: Camp Kawanhee,
PO Box 789, Yarmouth ME 04096

Fax to: 207 846 7731

Any questions: mark@kawanhee.com
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