

## MEDICAL EMERGENCY CARE AUTHORIZATION

Michigan Department of Human Services

**Notice:** By signing the reverse side of this card you are granting the operator of the camp organization authority to secure emergency medical, surgical treatment for your camper while attending camp if there is insufficient time to contact you. You are giving the camp operator permission to secure routine, nonsurgical medical care for your child while attending camp.

In accordance with MCLA Act 116 of the Public Acts of 1973 and the rules for licensing children's camps, this authorization must be signed by a parent or guardian unless there is religious objection.

MCLA 722, 124a, Section 14a(2) states: "A parent or guardian of a minor child who voluntarily places the child in a child care organization shall execute a written instrument investing the organization with authority to consent to emergency medical and surgical treatment of the child. The parent or guardian shall consent to routine, nonsurgical medical care.

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Name of Child (Print Last Name, First Name)	
I hereby give permission to the children's camp named below, which is licensed by the Department of Human Services, to secure emergency medical and surgical treatment and to provide routine, nonsurgical medical care, for the minor child named above, while attending camp.	
Parent Signature	Date of Signature
Parent Signature	Date of Signature
Camp Name (Print or Stamp)	
The Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your county.	

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