

TREASURE MOUNTAIN BIBLE CAMP  
STAFF MEDICAL HISTORY

Per the **RULES REGULATING CHILDREN'S RESIDENT CAMPS** in the State of Colorado, section **7.711.2 PERSONNEL 7.711.21 General Requirements for All Personnel**

E. Each staff member must complete a current health history and must have been examined within the last 24 months by a licensed medical health care professional approved to perform physical examinations. The health history must be completed within 90 calendar days of the beginning of working at the camp and shall be maintained in the personnel file at the camp.

Name: \_\_\_\_\_ Age \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

e-mail \_\_\_\_\_ cell: \_\_\_\_\_

Allergies: \_\_\_ Medicines \_\_\_\_\_

\_\_\_ Food \_\_\_\_\_

\_\_\_ Pollens \_\_\_ Stinging insects

\_\_\_ None known

1. Has a doctor ever restricted you from participation in sports? Yes \_\_\_ No \_\_\_

2. Do you have any ongoing medical conditions? Please check below:

Asthma \_\_\_ Anemia \_\_\_ Diabetes \_\_\_ Infections \_\_\_ Other \_\_\_\_\_

3. Have you had surgeries? Yes \_\_\_ No \_\_\_

4. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise? Yes \_\_\_ No \_\_\_

5. Have you ever fainted? Yes \_\_\_ No \_\_\_

6. Have you ever been diagnosed with a heart condition? Yes \_\_\_ No \_\_\_ If yes, check which:

High blood pressure \_\_\_ Heart murmur \_\_\_ High cholesterol \_\_\_ Heart infection \_\_\_

Other \_\_\_\_\_

7. Have you ever had a seizure? Yes \_\_\_ No \_\_\_

8. Have you ever had a fracture? Yes \_\_\_ No \_\_\_ Head injury? Yes \_\_\_ No \_\_\_

9. Have you ever been diagnosed with any of the following?

Arthritis \_\_\_ Mononucleosis \_\_\_ MRSA \_\_\_ Herpes \_\_\_ Seizure Disorder \_\_\_

Sickle cell trait or disease \_\_\_ Eating Disorder \_\_\_ Chicken pox \_\_\_ Mental Illness \_\_\_

Other \_\_\_\_\_

10. Have you ever had an eye injury? \_\_\_

11. What was the date of your last tetanus shot? \_\_\_\_\_

Please explain "Yes" answers below:

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Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_