

Online Health Care Form Information and Tutorial – Please read the entire document

Dear Camp Families,

This season, we are implementing a new method for entering you child’s summer camp emergency contact and health care information online. In order to process your information have it ready for camp, you **MUST complete the form online by May 20.**

To complete the form, you will create a secure online account by entering your household number, 10-digit phone number and last name as they appear in our database and when you registered online for camp.

IMPORTANT: Gather all the information you need to complete the form **BEFORE** logging in. The form should be filled out **in its entirety – in one session, and takes around 30 minutes.** You should have information ready to enter for:

Parent & Guardian Contacts

Emergency Contacts

Additional Authorized Persons

Medical Information – (Doctors, Dentists, etc.)

Physical/Mental/Social Restrictions (optional)

Date of last tetanus shot

Allergies, Medications, Dietary/Food Restrictions

Insurance Company and Policy Number (optional)

In addition, you should already have read and be familiar with all of the information in the Parent Handbook, available at <http://dublinohiousa.gov/recreation-services/camps/> . You are required to sign an acknowledgement at the end of the online form.

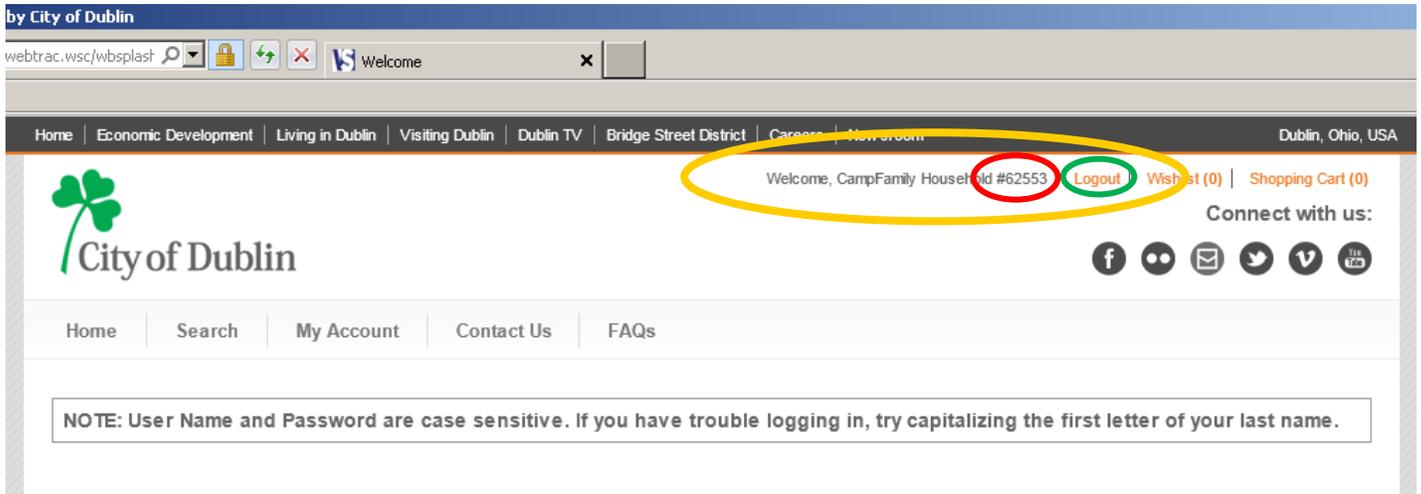
First, go to the Recreation Services online registration page at <https://recreation.dublin.oh.us/vsiwebtrac.html>

Enter the **User Name** and **Password** you normally use to register for activities. This is normally your 10-digit phone number (with no spaces or punctuation) and your primary household member’s last name, which is context sensitive.

Click the **Sign In** button.

The screenshot shows the City of Dublin Recreation Services website. At the top, there is a navigation bar with links for Home, Economic Development, Living in Dublin, Visiting Dublin, Dublin TV, Bridge Street District, Careers, and Newsroom. The City of Dublin logo is on the left, and the user is logged in as 'Guest'. A 'Connect with us' section includes social media icons for Facebook, Twitter, YouTube, and LinkedIn. Below the navigation is a search bar and a note: 'NOTE: User Name and Password are case sensitive. If you have trouble logging in, try capitalizing the first letter of your last name.' The main content area features a 'Member Login' form with fields for 'Username:' and 'Password:', and 'Sign In' and 'Reset' buttons. A red circle highlights the 'Sign In' button. To the right of the login form is a large image of people on exercise bikes. Below the login form is a 'Quick Links' section with links for 'Browse Activities', 'Browse Facilities', 'Event Calendar', and 'Contact Us'. A yellow box for 'Swim Lessons Registration' is also visible. At the bottom, there are three columns of links for 'Activities', 'Facilities', and 'Reservations'. The 'Activities' column lists various programs like 'Sports - All Ages', 'Sports Camps', 'Special Events', etc. The 'Facilities' column lists 'Shelters' and 'Birthday/Pool Parties'. The 'Reservations' section has a green button labeled 'Facility Reservations'. The browser's taskbar at the bottom shows several open windows, including 'ZENworks Window', 'Novell GroupWise - Mailbox', 'Mail From: JM Niswonger', 'Welcome - Windows L...', and 'On line Health Care Form...'.

To determine your **Household #**, look at the upper right corner of the screen, and make note of the number.



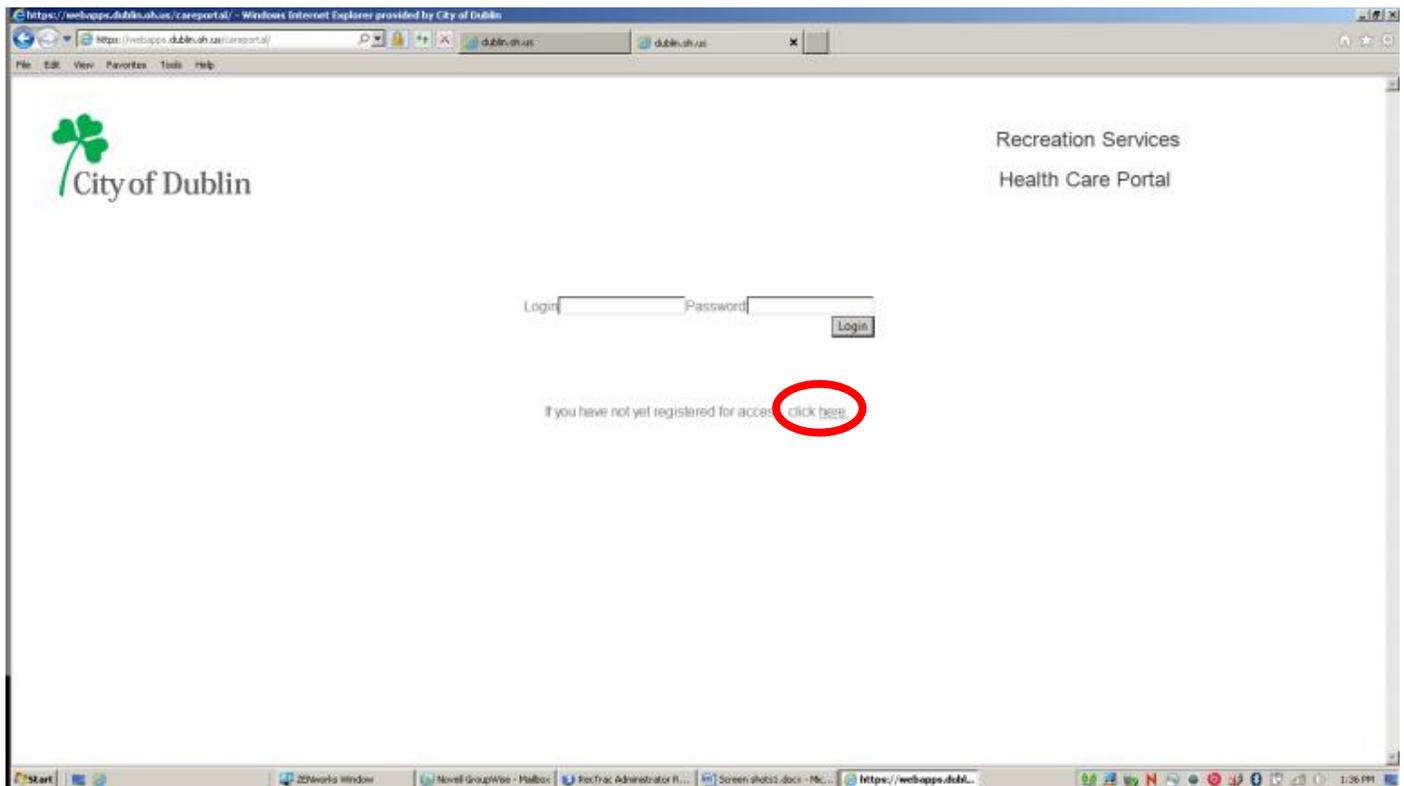
Click on **Logout** to exit the page.

You will now create a **new** account, user name and password for the online health care form site.

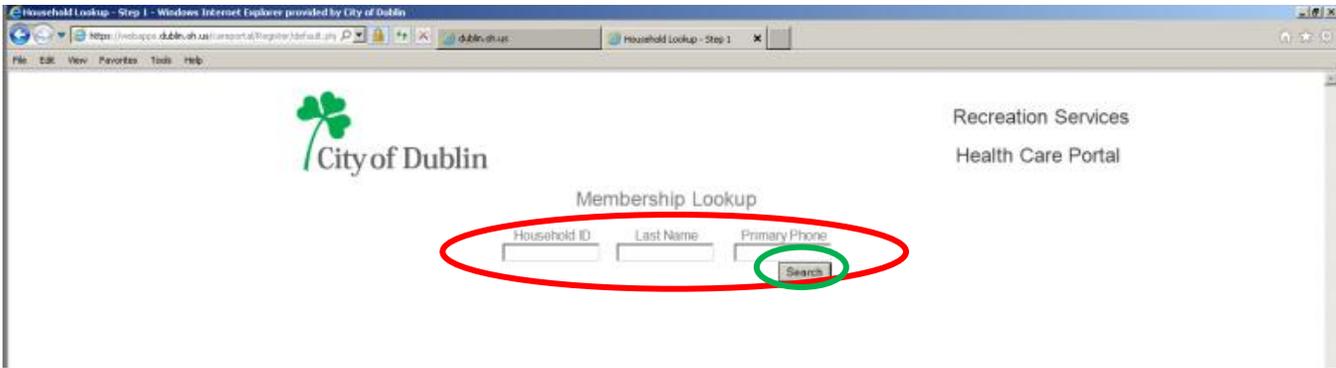
This is a secure website maintained by the City of Dublin. Your information will not be shared with any other third party and is only for staff use to ensure the well being of your child in our program.

Go to <https://webapps.dublin.oh.us/careportal/>

As a first time user, you do not yet have a Login and Password, so click on **here** at the end of the text.

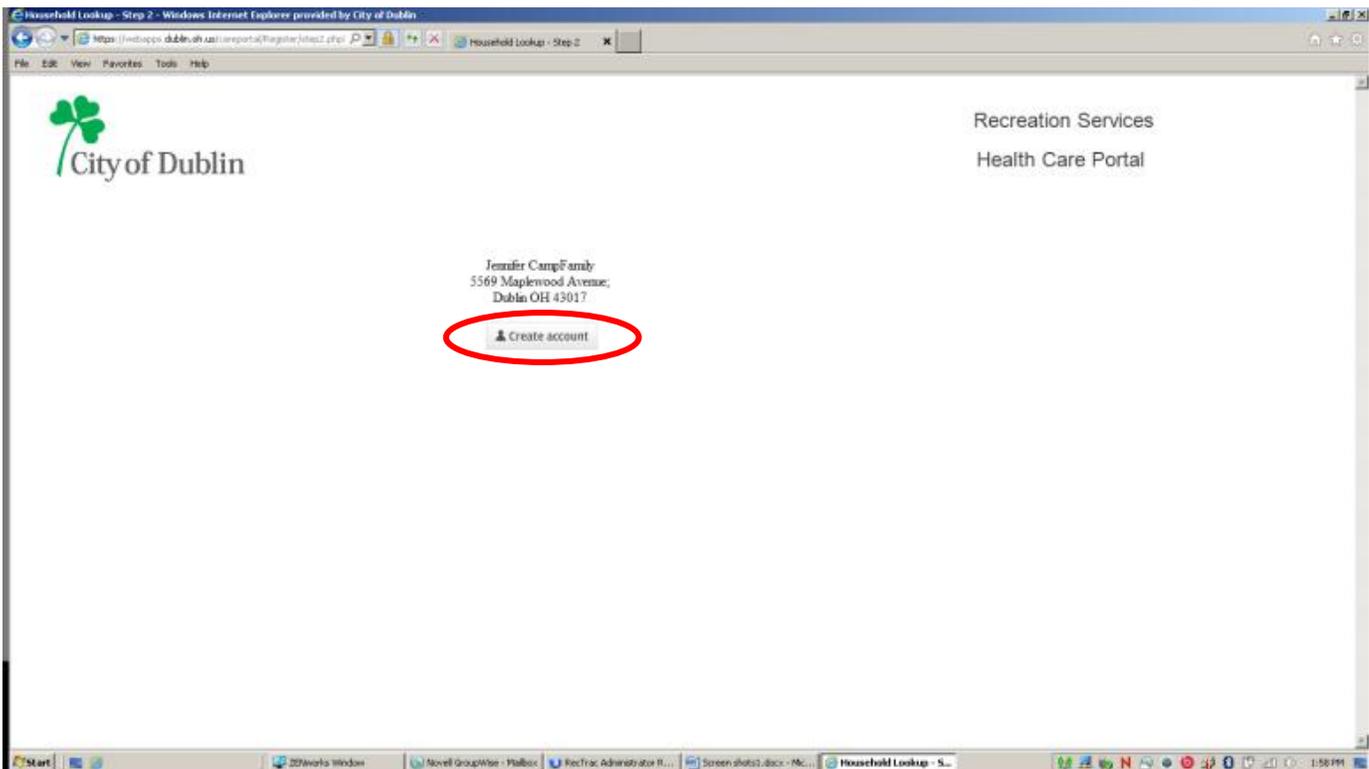


Enter your Household ID #, last name, and 10-digit phone number, the same ones you used to login to online registration. Click on the **Search** button.



Your household information should display – verify that it is correct. If it is not, call Recreation Services at 614.410.4550 to update your household information.

If the information is correct, click on **Create Account**.

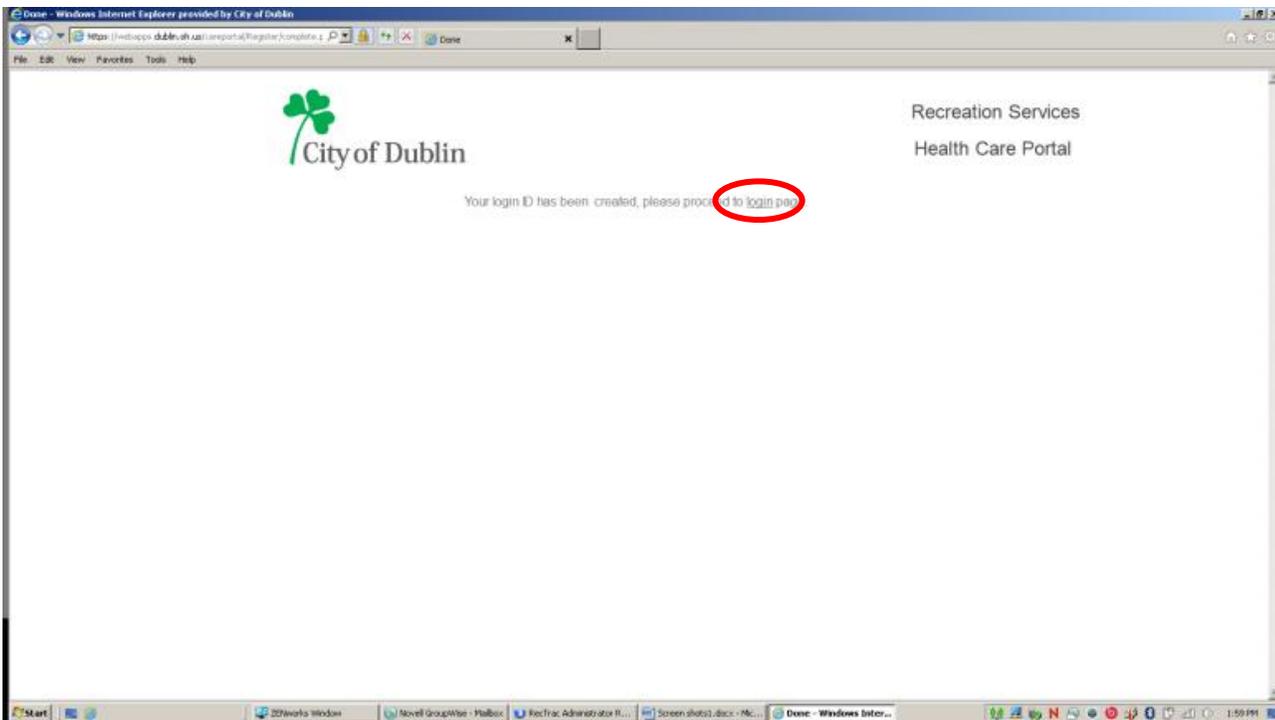


Enter a unique Login and Password, and remember/write it down. You will use this **Login and Password** to fill out a new or update/change the health care form.

Click the **Add** button

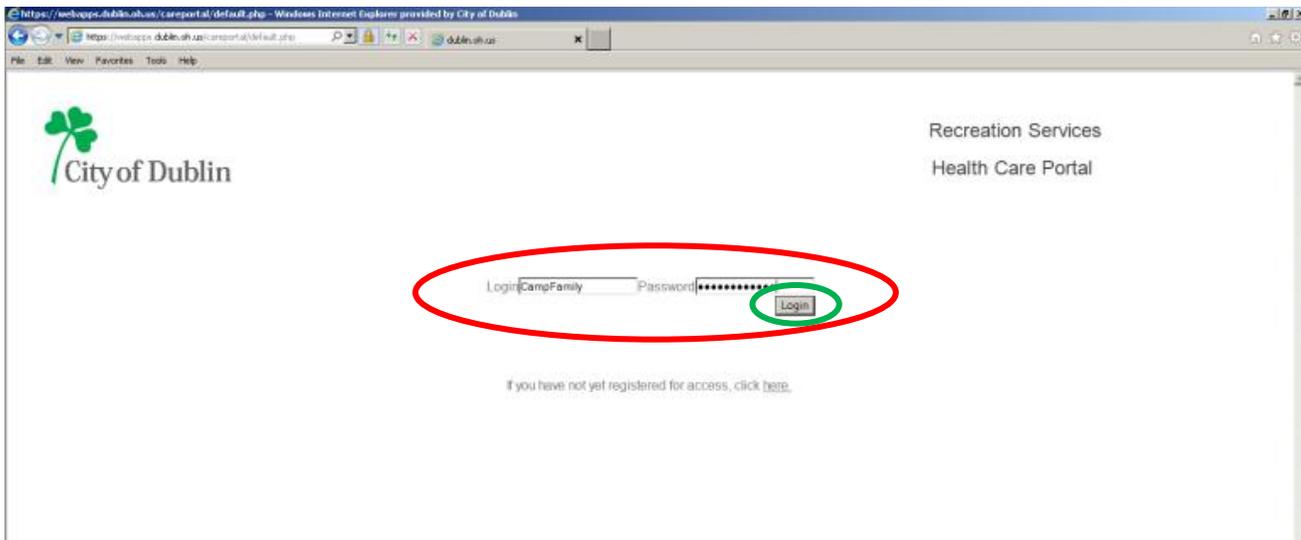


Click **login** at the end of the confirmation message



IMPORTANT: Gather all the information you need to complete the form **BEFORE** logging in. The form should be filled out in its entirety – in one session.

Enter the **Login** and **Password** you just created, and click **Login**

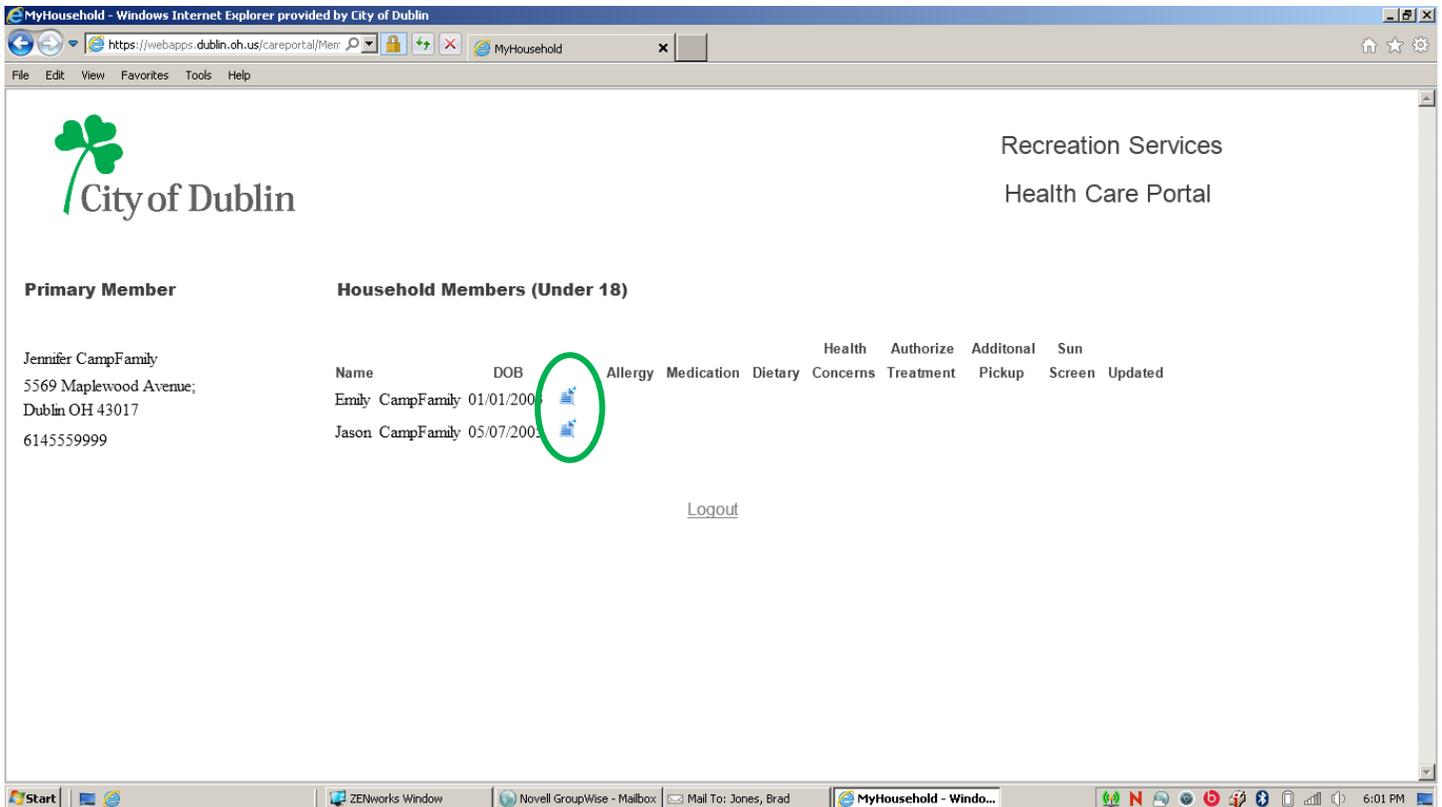


Your household information will display, along with the names and birth dates of your child(ren).

Verify that the information is correct. If it is not, **Logout** and call Recreation Services at 614.410.4550.

If all the information is correct, you may click on **the form icon** to begin entering information on the health care form for each child.

If you are ready to enter all the information required, click **the form icon** next to the child's name. Otherwise, **Logout** until you can gather it.



Recreation Services
Health Care Form
For all Participants

Participant's Name: CampFamily, Emily Birth Date: 1/1/2003 Gender: F Household Number: 62553

The information on this form is not part of the participant or staff acceptance process, but is gathered to assist us in identifying appropriate care. Any changes to this form should be completed online. PLEASE provide complete information so that the program is aware of your child's needs.

Please note that areas shaded in grey are voluntary and not required to participate in a camping program. We strongly encourage parents/guardians to complete the entire form in order for our staff to best serve your camper. Voluntary health information will not affect a child's access to the program (unless requested by the parent/guardian named on this form).

Parents / Legal Guardians

First Name	Last Name	Relation	Email	Cell Phone	Home Phone	Work Phone	Street	City	State	Zip	Delete
Jennifer	CampFamily	Mother	JCF@gmail.com	614-565-9999	614-802-0098	614-963-2145	5609 Maplewood Ave	Dublin	OH	43017	<input type="checkbox"/>
		Select Value									<input type="checkbox"/>

Submit Next

Continue filling out the form, remembering to click the **Submit** button for every new field and section, before moving on to the **Next** section. If you need to go back to a section, click the **Prev** button. You may navigate the form using **Next** and **Prev**, but the information you enter will not be saved unless you click **Submit**.

Additional Authorized Pickup

I give permission to any person named on this form as a parent, guardian, second parent, second guardian, or emergency contact, or as otherwise set forth below as "Additional Authorized Persons" to pick up this participant from The City of Dublin, Recreation Services camps/activities. I understand that I and any authorized persons must show appropriate identification (driver's license, photo ID) to remove this participant from The City of Dublin, Recreation Services camps/activities.

ADDITIONAL AUTHORIZED PERSONS (persons other than those listed in Parents/Legal Guardians or Emergency Contacts)

I authorize the following individuals to pick up participant from The City of Dublin, Recreation Services camps/activities (MUST be 18 years of age or older).

Name	Relationship	Primary Phone	Secondary Phone	Delete
Anderson Brown	Neighbor	4445698256		<input type="checkbox"/>
				<input type="checkbox"/>

Submit Prev Next

Medical Contacts

Type	Name	Phone
Doctor	James A Jekyll	6142221236
Dentist	Steven H Hyde	6147895698

YOU CANNOT LOGOUT OF THE FORM UNTIL IT IS COMPLETE. Once you reach the end of the form you must sign, date and submit the form.

If you don't have complete information to enter, click on the Next button until you reach the bottom of the form, then sign and submit.

If you have any difficulties completing your form, or questions prior to creating your account, please contact Recreation Services camp staff:

Preschool/Youth:

Sharon Adamek

Payment Specialist

sadamek@dublin.oh.us

614.410.4575

Erin Duffee

Preschool/Youth Program Supervisor

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Jill Niswonger

Logistics Specialist

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614.410.4596

Jennifer Vosters

Preschool/Youth Coordinator

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614.410.4573

Teens:

Scott Hanks

Teen Program Supervisor

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614.410.4557

Stacie Neilan

Program Specialist

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614.410.4578