

Westchester County Department of Health

Children's Camp Workshop 2016 Certificate of Compliance (Full)

This form certifies that the name listed below has viewed all of the Westchester County required Summer Camp Workshop presentations

INCLUDING the PowerPoint from the "in-person" portion covered 4/21/2016 at the Westchester County Center

Camp Name & Permit ID #: _____

Please enter your **Camp Name(s) and Permit #** in the above fields. This form must be completed by the Assistant Camp Director or other similarly qualified person in accordance with the Administrative Hearing Office directive resulting from ENFORCEMENT ACTION against your operation during the 2015 CAMP season.

Name (First Last):		Title:	
<u>Aquatics</u> 1 PowerPoint		<u>Orientation Training</u> 1 PowerPoint	
		<u>Concussions</u> 1 PowerPoint	
<u>2016 Children's Camp Workshop; Westchester County Center</u> 1 PowerPoint			

For further assistance CONTACT your District Office during normal working hours 8:30am-4:30pm

1. Mt. Kisco 914-864-7330