



**Cornell University**  
**Summer Sports School**

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Campus Road  
Ithaca, NY 14853

Dear parent(s) of resident campers:

I am writing to inform you of meningococcal disease; a potentially fatal bacterial infection commonly referred to as meningitis. On July 22, 2003, the New York State Public Health Law (NYS PHL) was amended to include statute 2167. This law requires overnight children's camps to distribute information about meningococcal disease and vaccination to the parents/guardians of all campers who attend camp for seven or more nights. This law became effective on August 15, 2003.

Cornell Sports School is required to maintain a record of the following for each camper:

- A response, signed by camper's parent or guardian; to receipt of meningococcal meningitis disease and vaccine information and information on the availability and cost of meningococcal meningitis vaccine (Menomune), AND EITHER
- A record of meningococcal meningitis immunization within the past 10 years; OR
- An acknowledgement of meningococcal meningitis disease risks and refusal of meningococcal meningitis immunization signed by the camper's parent or guardians

Meningitis is rare. However when it strikes, its flu-like symptoms make diagnosis difficult. ***If not treated early, meningitis can lead to swelling of the fluid surrounding the brain and spinal column as well as severe and permanent disabilities, such as hearing loss, brain damage, seizures, limb amputation and even death.***

Cases of meningitis among teens and young adults 15 to 24 years of age have more than doubled since 1991. The disease strikes about 3,000 Americans each year and claims about 300 lives.

A vaccine is available that protects against four types of the bacteria that cause meningitis in the U.S.: types A, C, Y and W-135. These types account for nearly two thirds of meningitis cases among teens and young adults.

Information about availability and cost of the vaccine can be obtained from your health care provider and by visiting the manufacturer's web-site at [www.meningitisvaccine.com](http://www.meningitisvaccine.com).

Cornell offers the meningococcal meningitis immunization; the fee is \$80. However, we recommend campers who choose to receive immunization, do so several weeks prior to attending camp. Immunization prior to camp will decrease the chance of side effects interfering with a child's ability to participate in camp activities. It will also provide the opportunity for parents and family physicians to monitor the child for any side effects.

I encourage you to carefully review the enclosed materials. Please complete the Meningococcal Vaccination Response Form and **return it** no later than **THREE WEEKS** prior to the start camp.

To learn more about meningitis and the vaccine, please feel free to contact the camp office by phone at (607) 255-1200 and/or your child's physician. You can also find information about the disease at the New York State Department of Health web-site: [WWW.HEALTH.STATE.NY.US](http://WWW.HEALTH.STATE.NY.US), and the web-site of the center for Disease Control and Prevention (CDC): [WWW.CDC.GOV/NCIDOD/DBMD/DISEASEINFO](http://WWW.CDC.GOV/NCIDOD/DBMD/DISEASEINFO).

Sincerely,

Gene Nighman, Director  
Cornell Sports School

Dear Camper and Parents,

New York State Public Health Law requires the operator of overnight children's camps to maintain a completed response form from every camper who attends camp for seven or more nights.

Please check one of the following responses.

\_\_\_\_\_ My child has had the meningococcal meningitis immunization (Menomune) within the past 10 years. Date of immunization: \_\_\_\_\_

(Note: The vaccine's protection lasts for approximately 3-5 years. Revaccination should be considered in 3-5 years.)

\_\_\_\_\_ I have read, or have had explained to me, the information regarding meningococcal meningitis disease (attached). I understand the risks of not receiving the vaccine. I have decided **NOT** to have my child immunized against the meningococcal meningitis disease.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Guardian)

Camper's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Street address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Parent/Guardian's email address: \_\_\_\_\_

Please mail this completed form to:  
**Cornell Sports School**  
**103 Bartels Hall, Campus Rd.**  
**Ithaca, NY 14853**