



## Catholic Diocese of Memphis Medication Consent Form

The purpose of administering medications and health care procedures in school/youth activities is to help each child maintain an optimal state of health to enhance his or her education or participation in youth activities. Medications should be limited to those required during school hours or youth activities and necessary to provide the student access to the educational program.

Parents are advised to give medication at home and on a schedule other than during schools hours/youth activities. If it is necessary that a medication be given during school hours/youth activities, the following regulations must be followed:

- Present a written consent form signed by the parent or legal guardian.
- Bring the medication to school/youth activities in the original prescription bottle, properly labeled by a registered pharmacist as prescribed by law. **If medication is not properly labeled, it will NOT be given.** *Non-prescription medication must be in the original container with original label listing ingredients, dose, administration schedule, and child's name on container.*

Name of Student: \_\_\_\_\_ Birthdate: \_\_\_\_\_

School/Parish: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher/Youth Minister: \_\_\_\_\_

Medication: \_\_\_\_\_

Time of day medication is to be given: \_\_\_\_\_

Possible side effects: \_\_\_\_\_

Anticipated number of days medication will need to be given: \_\_\_\_\_

Comments: \_\_\_\_\_

I, the parent/legal guardian authorize Diocese of Memphis Schools/Youth Programs to assist my child in taking oral medication. I agree that I will not hold liable any member of the Diocese of Memphis staff who is directed by the school administrator/youth directors to assist my child in taking oral medication.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

June 2011