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Headteacher:	Andy Purcell:	head@st-georges.lancs.sch.uk

Parental agreement for school to administer medicine

The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer the medicine.

Name of child	<input type="text"/>
Class	<input type="text"/>
Medical condition or illness	<input type="text"/>

Medicine

Name/type of medicine <i>(as described on the container)</i>	<input type="text"/>
Dosage	<input type="text"/>
Timing	<input type="text"/>
Duration	<input type="text"/>

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	<input type="text"/>
Daytime telephone no.	<input type="text"/>
Relationship to child	<input type="text"/>

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine.

Signature _____

Date _____

"Be determined and confident as God will be with you", inspiring you to "learn, care and share through work, play and prayer". Deuteronomy 31:6



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