

BJA SUMMER PROGRAMS

Summer Medication Form



We will not administer any medication without this *completed* form. All prescriptions and over-the-counter medication must be in the **original** container and within the expiration date. Staff will hold and dispense medication according to the physician's instructions or the instructions on the over-the-counter medication. Forms are valid for the summer or for the length of prescription as stated by physician.

Child's Name	Date
Medicine	Dose
Time to be given	Exp. Date
Reason	
Notes/Comments	

Parent Signature

Staff member will complete portion below.

Date	Time	Initials	Date	Time	Initials

Staff Initials	Staff Signature	Staff Initials	Staff Signature