



Children and Youth Medication Record

All Medications must be brought in the original container, indicating the participant's name, the dosage, directions for use and medication type. Non-prescription medications must be brought in the original container.

All emergency medication including auto-injectors, and inhalers must be carried by the participant (fanny packs can be provided). All non-emergency medication will be kept in a lock box with the program supervisor. Please disclose all medication brought to camp.

Name of Child:	
Medical Condition/ Allergy:	
Medication Name:	
Expiry Date:	
Times to Administer: Identify when your child will require the medication. (i.e.: Specific time, exposure to allergen or symptom).	Daily: As Needed: Emergency Situation:
Dosage to Administer:	
Are there side effects to the medication?	
Special Instructions (i.e. with food, medication needs to be refrigerated, etc.)	

Medication Administration Record (completed by staff)

Date	Medication	Dosage (amount)	Time	Staff Signature

Signatures

I hereby give permission for the Westside Recreation Staff to administer the above medication to my child as directed above.

Parent/Guardian Signature	Date
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