

# Liverpool's Camp Kop II Medication Form

Important: All medication sent to camp must be in the original container and must be specific to the camper for dispensation. No medication will be administered by camp staff without the original container. Medication that is outside the expiration date or has expired according to the doctor's prescription on the original container will not be administered.

To send medication to camp, this form and the medication must be enclosed inside a quart size baggie. On the outside of the baggie, please print the name of the child and name of the medication.

Parents do not need to be present when medication is given to camp staff, however, all forms must be completed and signed prior to any medication being given to a camper. Medication must be given to either cabin counselor or Nancy Lane or a Liverpool Staff member upon arrival at camp. There are no exceptions.

**If a child does not need medication, please indicate by checking the triangle below and sign at the bottom**

Name of child \_\_\_\_\_ Date \_\_\_\_\_

Team Name \_\_\_\_\_ Coach \_\_\_\_\_

**No medication required**



Medicine \_\_\_\_\_

Dosage \_\_\_\_\_ List Time to be given: 9 AM NOON 4PM

Reason for medication \_\_\_\_\_

Is Condition contagious \_\_\_\_\_ How long is medication to be given \_\_\_\_\_

Doctor \_\_\_\_\_ Doctor's phone # \_\_\_\_\_

Parent's Name \_\_\_\_\_

Parent's cell # \_\_\_\_\_ Home phone # \_\_\_\_\_

Liverpool Camp Kop II staff has my permission to administer this medication to my child according to instructions above.

Parent (print) \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_

Additional Comments for Prescription Medication may be made here.

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While at Camp Kop II, if under the advisement of Camp or Trained medical staff, a child requires one of the following over the counter medications, please give permission to dispense age/weight appropriate dosage.

Medication Name:	Yes, By checking the box below, I agree that my child may be given the over-the-counter medication indicated	No, by checking the box below, I agree that my child may NOT be given the over-the-counter medication indicated
Benadryl Liquid		
Acetaminophen		
Ibuprofen		
Antacid		
Diarrhea medication		
Topical Bee or Ant Sting medication		
Sunburn relief		
Pepto Bismol		