



Medication Administration Form

Please complete this **Medication administration** form and **Administration of medicines in schools indemnity** form and return to the school as soon as possible in order for your application to be processed. These forms will be retained by the school. Please note that the onus is on parents/guardians to inform the school of any changes to the information outlined below. Parents/guardians must ensure medication is brought on out of school trips, on swimming days, that medication is in date and that the authorised staff member(s) are in school.

Name of Child: _____

Class: _____

Photo of Child:

School will supply photo

Parents/Guardians: _____

Medical condition: _____

Symptoms:

Medication / Dosage details:

How to administer:

Emergency contact numbers of Parents/Guardians

1. _____

2. _____

3. _____

Family Doctor: _____

Telephone Number: _____

I wish to apply to the board of management for willing and trained members of staff to administer medication to my child

Signature of parents/guardians:

Date: _____



ADMINISTRATION OF MEDICINES IN SCHOOLS INDEMNITY FORM

THIS INDEMNITY made the _____ day of 20 __

BETWEEN _____ (lawful father and mother of _____)

of _____

_____ (hereinafter called 'the parents') of the One Part AND

Sinéad Watson for and on behalf of the Board of Management of Rathfarnham Educate Together National School, Loreto Avenue, Rathfarnham, Dublin 14 (hereinafter called 'the Board') of the Other Part.

WHEREAS:

1. The parents are respectively the lawful father and mother of _____, a pupil of the above school
2. The pupil suffers on an ongoing basis from the condition known as _____
3. The pupil may, while attending the said school, require, in emergency circumstances, the administration of medication _____
4. The parents have agreed that the said medication may, in emergency circumstances, be administered by the said pupil's classroom teacher and/or such other member of staff of the said school as may be designated from time to time by the Board.

NOW IT IS HEREBY AGREED by and between the parties hereto as follows:

a) In consideration of the Board entering into the within Agreement, the parents, as the lawful father and mother respectively of the said pupil HEREBY AGREE to indemnify and keep indemnified the board, its servants and agents including without prejudice to the generality the said pupil's class teacher and/or the Principal of the said school from and against all claims, both present and future, arising from the administration or failure to administer the said medicines.

IN WITNESS whereof the parties hereto have hereunto set their hands and affixed their seals the day and year first herein WRITTEN.

SIGNED AND SEALED by the parents in the presence of:

SIGNED AND SEALED by the said in the presence of:
