

St Mary's Junior School



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 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.

Child's Name & Address:	
Child's Date of Birth:	
Class:	
Name of Parents/Guardians:	1. 2.
Medical Condition:	
Symptoms:	
Medication Name & Dosage details:	
Storage details:	
How to administer:	
Emergency contacts of parents/guardians:	1.Name _____ Phone No. _____ 2.Name _____ Phone No. _____ 3.Name _____ Phone No. _____
Family Doctor & Contact details	G.P. Name _____ G.P. Phone No. _____

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: _____

St Mary's Junior School



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
_____ for and on behalf of the Board of Management of St. Mary's Junior
National School, Rowlagh, Clondalkin, Dublin 22 (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 Board in the presence of _____:
