

# Windwood Day Camp 2023

## Prescription Authorization Form

I \_\_\_\_\_ (parent or guardian) give permission for the camp staff to administer \_\_\_\_\_ (child's name) prescription medicine while attending Windwood Day Camp.

I agree that I have given proper written instructions on how to administer the medication and what day and time it needs to be given.

Medicine Description/Instructions:

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Date and Time to Administer: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_