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**“Working to Empower the Community”  
in Lancashire and Cumbria**

**Pamela Beswick - Chief Executive Officer**

Community  
Legal Service



Help Point

Consent form for staff to administer medication  
During a young people’s session

I give permission for staff to administer any **prescribed** medication to my child during a young people’s session.

Name of child.....

Name of medication .....(in its original container clearly labelled and named)

Dosage.....(i.e. 1 teaspoon)

Times.....(i.e. 10am, 2pm,etc)

Please give any additional information on administering the medication:

.....  
.....  
.....

The information above will be transferred to a medicine sheet and the member of staff responsible for administering the medicine will have a witness present. Both members of staff will sign the sheet after administering the medicine and the Parent / Guardian will be asked to sign the sheet at the end of the session.

I agree to the above procedures

Signed.....

Date.....

Charity Registration Number: 1117645  
Member of AdviceUK (previously FIAC)

Company Limited by Guarantee: 5990592  
Registered in England and Wales



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