

Highland Lakes Camp

Medication Administration Form

(Form Accompanies All Medications)



- All medications brought to camp must be included on this form and given to the church leader who will give it to the Medical Staff of Highland Lakes Camp at camp check-in.
- All medications must be listed on this form and placed in a large Ziploc bag, along with this form.
- Prescription medication must be properly labeled, if dosage on the container is different than what is to be given, a doctor's note must accompany the prescription with current instructions.
- No medication will be given unless they are in original containers per Texas Department of State Health Services.
- Highland Lakes Camp Medical Staff request that you do not send over-the-counter medications (i.e. Tylenol, Ibuprofen, Benadryl, etc). These types of medications can be provided by HLCCC.
- If you have any questions, contact the HLCCC Medical Staff at 512-264-1777 x3738.

Name: _____ Birth Date: ___/___/___ Age:___ Sex:___ Male ___ Female

Church Name: _____ Church City _____

Camp Name: _____ Camp Date: _____

As the parent or legal guardian of the above named child, I give my permission to the enlisted Highland Lakes Medical Staff to administer as prescribed by law the listed below medication to my child.

 Parent/Guardian Signature _____ Date _____ (____) _____
 Contact Phone #

Print Parent/Guardian Name

Medication	Form <small>(tablet,capsule, liquid, inhaler)</small>	Dosage <small>(amount to be given)</small>	Frequency <small>(how often)</small>	Purpose	Comment Special Instructions

If necessary, make additional copies of this blank Medication Form in order to provide requested information for each medication.