



Folly Road, Great Waldingfield, Sudbury, SUFFOLK. CO10 0RR
TEL: 01787 374055

Parental agreement for GWPS to administer non-prescribed medicine

The school will not give your child medicine unless you complete and sign this form

Name of child:	
Date of birth:	
Class:	
Medicine	
Name (as printed on the container):	
Dosage and method:	
Time of last dose (if applicable):	
Timing:	
Contact details of parent/carer	
Name:	
Contact number:	
Relationship to child:	

Name:	Date:
Signature:	