



INFORMATION AND PROCEDURES FOR HANDLING OF MEDICATIONS/EPI-PENS

1. Any medication, including Epi-Pens, taken or administered at Baseball World Training School **must** have a parent or legal guardian signed authorization: some medications may also require a physician order.
2. No medication may be accepted by camp personnel without receipt of appropriate medication and completed health form. Medication must be placed in a sealed bag and labeled with the child's name.
3. The parent or guardian must transport medication/Epi-Pen to camp and hand it to camp personnel. Medication/Epi-Pen kept at camp will be accessible only to authorized personnel. **It will be returned to parent or legal guardian at the end of each day.**
4. Baseball World Training School does not assume responsibility for unauthorized medication taken independently by the camper himself or herself.

Detach and return below part to Baseball World Training School



PARENTAL CONSENT FORM - Administration of Prescription Medication

****Any medication that can possibly be taken before or after camp should be administered at home****

Camper Name: _____ DOB: ____ / ____ / ____

Parent/Legal Guardian Name: _____

Daytime/Emergency Name and Contact Phone # _____

Name of medication: _____

Date first dose of medicine was given (all new prescriptions must first be administered by the parent to assure the camper will not have a negative reaction) _____

I give my consent for Baseball World Training School to administer the following prescription medication that I have provided for Baseball World Training School to my child, according to the directions given by physician or licensed prescriber. I agree to release and hold harmless Baseball World Training School and any of their staff members from lawsuit, claim, expense, demand, or action, etc. against them for assisting this camper with this medication, provided Baseball World Training School complies with the directions. I have read the procedures outlined at the top of this form and assume all responsibilities as required.

Signed _____ Date _____

Signature of parent or legal guardian