University of Notre Dame

DNA Center Summer Camps

RE: Storing or administering prescription or non-prescription medications

I understand and acknowledge by my signature below that the University of Notre Dame does not have the medical staff or resources available during DNA Center Summer Camps to store or administer prescription or non-prescription medications for my child. I have decided as the child’s parent or guardian that my son or daughter is capable of taking his or her own medication(s) throughout his or her stay at Notre Dame, or that one of my child’s parents or his or her legal guardian will be personally present and available to administer the medication to my child throughout the Program. I know that Notre Dame staff will not store or administer medications, prescription or non-prescription, for my child during the Program. If I decide that my child can take his or her own medication during the Program, I will exercise best efforts to remind my child to take his or her medication.

Name of Child(print) _____________________________________

By:  ____________________________________________

Parent or Legal Guardian  (Signature)

Date:  ___________________________________________