



Scouting is for
young people
... and also for
adults

Medical Administration Consent form

Child Name: _____

Section: Beaver / Cub / Scout / Explorer (Please circle)

Medication details and Instructions:

Consent

I give permission for the Leaders of the 17th Harrow Scout Group to administer the above mentioned medication as per my instructions.

Parents/Guardian Name: _____

Signature: _____

Date: _____