

**Menchaca Running Camp (M.R.C.)
Runner Medication Form**

In order to dispense medication, we must have parent authorization. Please list all medications, dosages, and frequencies and times. If runner does not require any medication, write DOES NOT APPLY on form. All runners are required to submit a medication form with parent/guardian signature.

Please note: all prescription and non prescription medications will be collected at check-in. Medications will be administered as directed (according to bottle or label or per parent request). Please provide all medications, in their original packaging with dosage and physician information in a resealable plastic bag with the camper's name on the front. Medications will be returned upon check out.

Inhalers and epi pens may be carried by the runner but must be noted to Menchaca Running Camp Staff.

Please administer the following medications, as directed, to the runner named below during his/her camp stay at Menchaca Running Camp.

Medication Name:	Dose:	Frequency:	Times (am/pm)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Runner's Name Print: _____

Parent/Guardian Print: _____

Parent/Guardian Signature: _____

Date: _____