

# Guardian Signature Sheet

Eugenio, Benjamin

JEMS Special Camp 2019

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Camper will receive the following medications/supplements at the indicated times:

<i>Time</i>	<i>Days</i>	<i>Medication</i>	<i>Purpose</i>	<i>Dosage</i>	<i>Frequency</i>	<i>Special Instructions</i>	<i>Initial</i>
as needed	Su Mo Tu We Th Fr	Xyzal	treatment for sinus allergies	5 mg/tab--dose is 1 tablet	as needed for allergy symptoms at bedtime, if needed	as needed once per day. SE--fatigue, pyrexia, dry mouth, epistaxis, diarrhea, vomiting, cough. discontinue if urinary retention;	

I acknowledge that the above medications listed are complete and accurate for the above camper.

signed: \_\_\_\_\_ relationship to camper: \_\_\_\_\_ date: \_\_\_\_\_

2019-06-09