

RUTHERFORD COUNTY BOARD OF EDUCATION

Health Services Department
2240 Southpark Drive
Murfreesboro, Tennessee 37128
Phone (615) 893-5812, ext. 22077 Fax (615) 904-3797

Dear Parent/Guardian:

If your child will be attending the upcoming overnight &/or weekend field trip to

Land Between the Lakes (LBL) on 9/7-9/22 and will require
(destination) (date)

medication while on the trip, please note that a **parent or teacher volunteer will be responsible for storing and administering all medicines** while on this field trip.

If you agree, please complete the box below:

I give permission for <u>MSE teachers & admin</u> to store and administer (Name of Volunteer)	
medication for my child, _____, while on the above (Child's Name)	
field trip.	
_____	_____
(Parent/Guardian Signature)	(Date)

Please follow the instructions below when bringing in your child's medication(s):

- Medication must be in the original package/bottle with prescription information on bottle.
- Do not send medication by the child - all medications must be brought by an adult).
- Give medicine directly to the individual named above, along with any pertinent instructions.

If you have any questions, please ~~call~~ your child's teacher.

email

→ Mrs. Merryman
(will collect meds.)

Respectfully,

Ms. Jones via

School Nurse