Prescription medication must be i	in a container labeled by	y the pharmacist or	prescriber.
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CITY

Nonprescription medication must be in the original container with the instructions for use. Nonprescription medication includes vitamins, homeopathic, and herbal medicines.

ZIPCODE

STATE

FAX

ADDRESS ZIPCODE CITY STATE DATE (Parent cannot sign here)

(ORIGINAL SIGNATURE OR SIGNATURE STAMP ONLY)