

**NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
NON-MEDICATION CONSENT FORM**

This form may be used when a parent consents to having over-the-counter products administered to their child in a child day care program. These products include, but are not limited to: topical ointments, lotions and creams, sprays, sunscreen products and topically applied insect repellent.

If parent's instructions differ from the instructions on the product's packaging, permission must be received from a health care provider or licensed authorized prescriber.

PARENT TO COMPLETE THIS SECTION

Child's first and last name: _____

Date of birth: _____ Child's known allergies: _____

Name of product (including strength): _____

Amount to be administered: _____

Frequency to be administered: _____

Special instructions: _____

Reason(s) for use (unless confidential by law): _____

12. Parent name (please print): _____

13. Date authorized: _____

14. Parent signature: _____

CHILD CARE PROGRAM TO COMPLETE THIS SECTION

Program name: _____

Facility ID number: _____

Program telephone number: _____

Staff's name (please print): _____

Staff's signature: _____

Please note that NY regulations require new unused products be brought in for use in childcare. Product must be labeled with first and last name

