

**ADMINISTRATION OF MEDICINES IN
VOLUNTARY SECONDARY SCHOOLS**

INDEMNITY

THIS INDEMNITY made the _____ day of _____ 200____ BETWEEN
(lawful father and/or mother/guardian(s) of _____)
of _____
(hereinafter called "the parents") of the One Part AND the School
Manager of _____ Secondary School situated
at _____

in the County of _____ (hereinafter called "the School Manager") of
the Other Part.

WHEREAS:

1. The parents are respectively the lawful father and/or mother/guardian(s) of _____ a pupil at the above school.
2. The pupil suffers on an ongoing basis from the condition known as _____.
3. The pupil may, while attending the said school, require, in emergency circumstances, the administration of medication, viz. _____.
4. The parent(s)/guardian(s) have agreed that the said medication may, in emergency circumstances, be administered by _____ or any such other member of staff of the said school as may be designated from time to time by the School Manager.

NOW IT IS HEREBY AGREED by and between the parties hereto as follows:-

Principal: Patricia Gordon Deputy Principal: Siobhan Reynolds


STRATFORD COLLEGE

- a) In consideration of the School Manager entering into the within Agreement, the parents, as the lawful father and mother respectively of the said pupil HEREBY AGREE to indemnify and keep indemnified the School Manager, its servants and agents including without prejudice to the generality the said pupil's class teacher and/or Principal of the said school from and against all claims, both present and future, arising from the administration or failure to administer the said medicines.

IN WITNESS whereof the parties hereto have hereunto set their hands and affixed their seals the day and year first herein WRITTEN.

SIGNED AND SEALED

by the parents

in the presence: _____

SIGNED AND SEALED

by for and on behalf of
the School Manager

in the presence of: _____

Principal: Patricia Gordon Deputy Principal: Siobhan Reynolds