

Consent Form: Use of Emergency EpiPen
Calthorpe Park School

Child showing symptoms of anaphylaxis/having an allergic reaction

I can confirm that my child has been diagnosed with anaphylaxis and has been prescribed an EpiPen

My child has an in -date EpiPen, clearly labelled with their name, which they will bring with them to school every day.

In the event of my child displaying symptoms of anaphylaxis, and if their EpiPen is not available or is unusable, I consent for my child to use the emergency EpiPen held by the school for such emergencies.

Signed Date.....

Name (print).....

Child's name:..... Form.....

Parent's address and contact details:

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Telephone.....

Email.....