Medication Log¹

Diocese Location: _	 City:	
Minor Name:		

Date	Time	Medication Name	Dosage	Self/ Staff	Staff Member

¹ This Medical Log and separate Medical Authorization Release and Indemnification Agreement is required for the handling or administering of medication for minors or persons under disabilities.

Medical Log 2016 01 27 RCBM final2.docx

Roman Catholic Diocese of Manchester