Notus School District No. 135

STUDENTS

3510F2

Indemnification/Hold Harmless Agreement for Self-Administration of Medication

Student Name:	
from any and all claims, actions, costs, expenarising out of, connected with, or resulting from parent(s) /guardians(s) agree(s) that the School employees and its agents shall incur no liability with the self-administration of medication by that they will not institute either on their own	r, defend, and hold the Notus School District harmless ses, damages, and liabilities, including attorney's fees, om the self-administration of medication by the pupil. The ol District, Board of Education, Board of Education ity as a result of any injury arising out of or connected the pupil. Specifically, the parent(s) /Guardian(s) agree behalf or on the behalf of the pupil, any claim or action acation employees and its agents arising out of or tion by the pupil.
<u> </u>	sted below and shall stay in effect for as long as the pupil dication. This agreement must be signed and in full effect minister medication.
Parent/Guardian's Name (Please Print)	Parent /Guardian's Signature
Parent/Guardian's Name (Please Print)	Parent /Guardian's Signature
Principal's Signature	Date of Agreement
Policy History Adopted on: October 8, 2018 Reviewed on: April 24, 2023	