

Tiger Learning Center- Rockdale ISD

Authorization for the Application of Topical Products

Child's Name: _____

I give permission for Tiger Learning Center staff to apply the following products that I have provided for my child : (please place an "X" next to each product)

() Diaper Ointment- date brought to Center: _____

() Sunscreen- date brought to Center: _____

() Insect Repellent- date brought to Center: _____

() Skin Cream- date brought to Center: _____

() Other _____ - date brought to Center: _____

This one-time authorization will remain in effect until a new authorization is signed.

Signature of Authorizing Adult

Date