



SUNSCREEN & TOPICAL PREPARATIONS PREVENTATIVE PERMISSION FORM

This form covers preventive topical preparations that may be applied to the skin with parent/guardian permission.

SUNSCREEN

I give my permission for the staff at the site listed below to assist with applying or apply sunscreen to my child's exposed skin including the face, tops of ears, bare shoulders, arms, legs, and feet **30 minutes before outdoor activities**. It is my responsibility to provide sunscreen with a minimum **15 SPF**.

Site / Program: _____

In the event that my child does not have sunscreen with them, the school may apply the following to my child:

Name of sunscreen & SPF: _____

☐ My child may NOT use any sunscreen other than the one that s/he brings.

Parent/Guardian Signature: _____

Date: _____

TOPICAL PREPARATIONS

Child's Name: _____

Parent/Guardian's Name: _____

I understand that I must provide the topical preparation in the **original container labeled with my child's name** and that no topical preparations will be applied to broken skin or if a skin reaction has been observed. It is my responsibility to check the ingredients to make sure my child is not allergic to it. **Any skin reaction observed by staff will be reported promptly to the parent/guardian.**

Parent/Guardian Signature: _____

Date: _____

MOISTURIZING LOTION / CREAM / BALM

I give my permission for the staff at the site listed below to assist with applying or apply skin lotion/cream/balm to my child.

Site / Program: _____

Name of product: _____

Special instructions: _____

☐ My child may NOT use any other skin lotion/cream/balm than the one s/he brings.

Parent/Guardian Signature: _____

Date: _____