

**Over the Counter Skin Products (Sunscreen & Insect Repellent) Permission and Authorization of use and application.**

I hereby grant permission for my child, \_\_\_\_\_ to have sunscreen and/or insect repellent applied under the supervision of staff members. I further understand that these products brought from home must be labeled and in the original container. I also understand that use of such products at the Child Care Center will be documented.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

Revised 1/2017