

Sunscreen Permission Form

Child's First and Last Name	Classroom		
I hereby give permission for my child to have sunscreen applied directly to exposed skin areas before going outside. I understand that I am responsible to provide sunscreen with a sun protection factor of at least 15. Sunscreen without Paba is recommended because some children can get a blotchy, red rash from the Paba. I will mark my child's name on his/her sunscreen with a Permanent Marker.			
		Signature of Parent or Guardian	Date
		Bug Repellent Permissio	n Form
Child's First and Last Name	Classroom		
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I understand that I am responsible to provide bug repellent.			
I will mark my child's name on his/her bug repellent with a	Permanent Marker.		
Signature of Parent or Guardian	Date		