



PARENT AUTHORIZATION FOR SUNSCREEN

I give my permission for my child _____
Child's Name
to use parent provided sunscreen this summer. I understand that the
sunscreen must be hypoallergenic with a minimum SPF of 15.

List Brand Name _____

I agree to provide the sunscreen in the original container labeled with
my child's name.

Please list any known reactions your child has had to sunscreen:

Sunscreen expiration date (if any) _____

Parent Signature

Date

Please be advised that Kiddie Country's Sunscreen Policy, as outlined in the parent Policy Handbook, is expected to be adhered to by staff and parents.

RV 8/15/2020