

Sunscreen- Diaper Cream Permission Slip

This form gives Little Playhouse permission to apply sunscreen or diaper cream.

Child's Name: _____ Date: _____

The undersigned further acknowledges that s/he has requested that staff, its employees and/or duly authorized agents administer or assist in administering the sunscreen, diaper cream listed below to _____ while s/he is under the supervision of Little Playhouse

Sun Screen: Name Brand: _____

Diaper Cream: Name Brand: _____

Parent Name _____

Parent Signature _____

(The actual product to be applied & it must be labeled with your child's full name.)