

Peace Early Learning Center

Sunscreen Authorization

| | |
|-----------------------|--|
| Child's Name | |
| Date of Birth | |
| Parent/ Guardian Name | |

Our school is required by the state to put sunscreen on your child when they play outside. 7.702.52 D.2. The center must apply sunscreen, have the parent or guardian apply sunscreen, or use another form of parent or guardian approved sun protection for children prior to children going outside. Sunscreen must be reapplied as directed by the product label.

This authorization is limited to the following sunscreen (please select one):

_____ **School Provided Sunscreen: Rocky Mountain Sunscreen KIDS SPF 30**

_____ **Personal Sunscreen:** _____

By signing below, you are acknowledging that:

- I have checked ingredient labels and I know this product is safe for my child and my child has no known allergies to this product.
- I am aware that these products cannot be applied to an open wound without a doctor's permission.
- I acknowledge that the uses of topical medications are for PREVENTATIVE use only.
- I give permission for the staff to assist my child in applying sunscreen when necessary to do so.

This agreement is valid June 1st, 2024 through May 31st, 2025

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

_____ OR _____

Sign below if you refuse consent for sunscreen.

- Do **NOT** apply sunscreen to my child under any circumstances.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____