

Sunscreen and insect repellent permission form

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We protect children from sun and bugs when they play outside. Check each one you agree to, and choose your product or ours. Leave a box blank to say no. This permission lasts until [date, or the end of this program year] unless you change it in writing.

Child

Full name _____

Date of birth _____

Room or group _____

Sunscreen

We use broad-spectrum sunscreen with an SPF of at least [15], as AAP advises. We put it on [15 to 30] minutes before outdoor time and put more on every 2 hours and after water play or heavy sweating.

- ☐ Staff may put sunscreen on my child
- ☐ Use the sunscreen I send (labeled with my child's name)
- ☐ Use the program's sunscreen: [brand and SPF]

Sunscreen brand and SPF (if you send it) _____

Babies younger than 6 months

AAP advises keeping babies younger than 6 months out of direct sun. We use shade, hats and light clothing that covers arms and legs. If shade and clothing aren't enough, we'll put a small amount of sunscreen on small areas, such as the face, only if you checked the first sunscreen box.

Insect repellent

We follow AAP and CDC guidance. We don't use insect repellent on babies younger than 2 months, and we don't use oil of lemon eucalyptus (OLE) or PMD on children younger than 3. We don't use products that combine sunscreen and insect repellent. Staff put repellent on after sunscreen, only on exposed skin [and clothing]. They don't put it on children's hands or on cuts or irritated skin, and they keep it away from eyes and mouths. For the face, staff put repellent on their own hands first. [We wash it off with soap and water when children come inside, or we ask you to wash it off at home.]

- ☐ Staff may put insect repellent on my child
- ☐ Use the repellent I send (labeled with my child's name)
- ☐ Use the program's repellent: [product and active ingredient]

Repellent product and active ingredient (such as DEET or picaridin), if you send it

Skin allergies and other products

We use other skin products only as you list them here. Medicine for a rash or other skin condition needs our medication authorization form.

Skin allergies or sensitivities (such as to a sunscreen ingredient)

Other skin products staff may use, and when (such as lip balm, lotion or diaper cream)

Parent or guardian

I give permission for staff to use the products I've checked on my child. I'll tell the program in writing if anything changes.

Parent or guardian's printed name _____

Parent or guardian signature _____

Date _____

Free to use and change, but not legal or medical advice. Check your state's licensing rules and your insurer's requirements, and have a lawyer review any consent or waiver language.

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