



Product Use

Child's Name _____

Child's Name _____ Date _____

Products provided by Parent/Guardian:

1) Product Name _____

Special Instructions _____

2) Product Name _____

Special Instructions _____

SUNSCREEN APPLICATION:

You may apply sunscreen to my child.

You may NOT apply sunscreen to my child.

**I understand that I am responsible for providing sunscreen.

I hereby authorize Dawn Isley, my child's Care Provider, to use the aforementioned products on my child according to manufacturer's written instructions. I will not hold the above named Provider liable for any allergic reactions or other symptoms when the products are used in accordance with these terms.

Signature of Parent/Guardian _____ Date _____