

Parent's/Guardian's Permission To Apply Sunscreen & Bug Spray To Child

Name of Child: _____

As the parent or guardian of the above child, I recognize that overexposure to the sun's rays without adequate protection may increase my child's risk of getting skin cancer. Regular use of sunscreen can help to prevent skin damage. Further, I recognize at times playground areas may have mosquitoes, gnats, flies and other insects, which can make outdoor play uncomfortable. Usage of a small amount of bug spray can make play more comfortable and lower the chances of contracting insect spread diseases. Therefore, I give my permission for personnel at:

Regina Early Childhood Center

to apply *Bug Soother (Deet Free)* when personnel deems necessary and to apply a sunscreen product of SPF-15 or higher to my child, as specified below when he/she will be playing outside especially during the months of April-September between the daily times of 10am to 4pm.. I understand that sunscreen may be applied to exposed skin, including but not limited to the face, tops of the ears, nose and bare shoulders, arms, and legs. I understand that bug spray may be applied to exposed skin on the legs, arms, and neck. I have checked all applicable information regarding the type and use of sunscreen and bug spray for my child:

- I do not know of any allergies my child has to sunscreen or bug spray.
- Staff may use the sunscreen of their choice and Bug Soother (Deet Free) following the directions and recommendations printed on the bottles.
- I have provided the following brands/types of sunscreen and/or bug spray for use on my child:

- My child is allergic to some sun screens/bug sprays. Please use only the following brand(s) and type(s) of sunscreen/bug sprays: _____

- For medical or other reasons, please do not apply sunscreen/bug spray to the following areas of my child's body: _____

Parent/Guardian full name (print): _____

Parent/Guardian
signature: _____ Date: _____