Sunscreen Permission Form
2018-2019

If you would like a CMP staff member to apply sunscreen to your child, please provide us with an unexpired bottle of sunscreen, labeled with your child’s first name.

The first application of any brand of sunscreen should be applied at home in order to evaluate your child’s possible allergic reaction to that product.

___ Yes, I give staff permission to apply the sunscreen provided for my child.

___ No, do not apply sunscreen on my child.

__________________________
Child’s Name and Classroom

__________________________     ____________
Parent’s Signature              Date

*Permission slips are good for the above mentioned school year, including summer intersession.