



Vernon Child Development Center  
Sunscreen and Insect Repellent Authorization

\_\_\_\_\_

Child's Name

\_\_\_\_\_

Classroom

Yes  No I authorize the Center to apply sunscreen to my child.

Yes  No I authorize the Center to allow my child to self-apply sunscreen.

Sunscreen Brand Name \_\_\_\_\_

Ingredient Strength \_\_\_\_\_

Yes  No I authorize the Center to apply insect repellent to my child.

Yes  No I authorize the Center to allow my child to self-apply insect repellent.

Insect Repellent Brand Name \_\_\_\_\_

Insect Repellent Ingredient Strength \_\_\_\_\_

Parents are responsible for providing sunscreen and insect repellent for their child's use.  
All containers must be labeled with the child's name.

\_\_\_\_\_

Parent Signature

\_\_\_\_\_

Date