**Little Friends Preschool**

***A Child's******Pathway******to Learning***

Sunscreen Lotion

Consent Form

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parents,

Summertime will soon be here, and the sun will be shining very brightly. We will be spending more and more time outdoors. We advise you to bring sunscreen lotion for your child/children to help protect them from the sun’s harmful rays.

\_\_\_\_\_ YES, I have brought sun block lotion for my child. I give permission for the staff at Little Friends Preschool to apply this lotion before my child goes outdoors.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Sun Block Lotion Expiration Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Parent/Guardian Signature Date*

OR

\_\_\_\_\_ NO, I have not brought sun block lotion for my child and do not want the staff at Little Friends Preschool to apply any lotion to my child/children.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Parent/Guardian Signature Date*