IVY LEAGUE CHRISTIAN ACADEMY

Sunscreen/Insect Repellent Form

If you want to have sunscreen/insect repellent applied to your child before they go outside during the spring/fall months, please fill out the form below. **PARENT must provide the sunscreen/insect repellent**. Please write your child’s name and date on the bottle and give it to your child’s teacher along with this form.

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, give Ivy League Christian Academy permission

(parent’s name)

to apply sunscreen/insect repellent to my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, before

(child’s name)

going outside to play.

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

Parent/Guardian Signature

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

Parent/Guardian Signature