LITTLE SCOUTS
learning through play

PERMISSION FORMS FOR THE APPLICATION OF CREAMS

CHILD'S NAME:_____ CHILD'S DOB: _____

SUNSCREEN PERMISSION

I give permission for Little Scouts to apply sunscreen that is supplied from home.

Initial_____ opt out_____

INSECT REPELLANT PERMISSION

I give permission for Little Scouts to apply sunscreen that is supplied from home.

Initial_____ opt out_____

DIAPER CREAM PERMISSION

I give permission for Little Scouts to apply sunscreen that is supplied from home.

Initial_____ opt out_____

PARENT/GUARDIAN NAME_____

PARENT/GUARDIAN SIGNATURE _____