Permission for:

- Non-prescription creams, ointments, lotions
- Non-prescription sunscreen
- Non-prescription insect repellant

This form cannot be used for:

- Prescription ointments/creams
- Medication taken orally (non prescription or prescriptions)
- Nose, ear, or eye drops

_____ has permission to
(child)
have the following applied as needed:

_____
(ointment, cream, lotion, etc.)

_____ _____
Signature of Parent Date

For diaper ointments and insect repellants the following record must be kept by staff:

Date	Time	Adverse Reactions	Staff Person