**Sunscreen Permission Form**





**Tudorka Tots Infant & Preschool Centers**

**5040 Mountain Dr. Oakland, CA 94619**

**12000 Campus Dr. Oakland, CA 94619**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent/guardian), give Tudorka Tots permission to apply sunscreen to my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (child’s name).**

**I understand sunscreen will only be applied in the afternoons and accept responsibility of applying morning sunscreen prior to my child’s daily attendance as needed.**

 **□ Please only use \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ brand, which I have provided.**

**□My child is not allergic to sunscreen. I have provided \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ brand sunscreen, but any brand is ok to use.**

Parent/ Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sunscreen Permission Form**





**Tudorka Tots Infant & Preschool Centers**

**5040 Mountain Dr. Oakland, CA 94619**

**12000 Campus Dr. Oakland, CA 94619**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent/guardian), give Tudorka Tots permission to apply sunscreen to my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (child’s name).**

**I understand sunscreen will only be applied in the afternoons and accept responsibility of applying morning sunscreen prior to my child’s daily attendance as needed.**

 **□ Please only use \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ brand, which I have provided.**

**□My child is not allergic to sunscreen. I have provided \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ brand sunscreen, but any brand is ok to use.**

Parent/ Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_