

Anchor Bay  
Early Childhood Programs

**Sunscreen Permission**

Childs Name \_\_\_\_\_

**Sunscreen**

I give permission for the staff of the Anchor Bay Early Childhood Center to apply sunscreen on my child, daily if necessary. I understand that **I must provide the sunscreen** and label it with my child's full name.

\_\_\_\_\_

Initials

Name of sunscreen \_\_\_\_\_

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

\_\_\_\_\_  
Date

