



Pebble Pond Preschool Sunscreen Utilization Consent

Name of Child: _____ Date: _____

As the parent or guardian of the above child, I recognize that over exposure to sunlight may increase my child's risk of getting skin cancer. Therefore, I give my permission for Pebble Pond Preschool staff to apply a sunscreen product of SPF 30 or higher to my child (unless otherwise noted below) when he or she will be playing outside. A brand of sunscreen is purchased and provided by Pebble Pond Preschool for use on children. If my child needs a different brand of sunscreen, I am responsible for providing the center with a substitute. I understand that sunscreen may be applied to exposed skin, including but not limited to the face, tops of ears, nose and bare shoulders, arms and legs (inquire with the Director for the current brand of sunscreen used).

If I do not want sunscreen applied to my child, or if I prefer to provide a different sunscreen than the center provides, I have indicated this by initialing the appropriate statement below.

_____ I do not want sunscreen applied to my child's skin.

_____ I will provide a brand of sunscreen that is different from what the center uses.
(The sunscreen I provide will be stored at the center)

Brand of sunscreen: _____

I understand this service is an accommodation for me and I will not hold the staff, Director, or Pebble Pond Preschool liable for the proper administration of the items listed on this page or for any adverse effects of their use.

Parent/Guardian Signature

Date



Pebble Pond Preschool Insect Repellant Utilization Consent

Name of Child: _____ Date: _____

As the parent or guardian of the above child, I recognize that mosquito and/or other insect bites can pose a health risk to my child. Therefore, I give my permission for Pebble Pond Preschool staff to apply an insect repellant to my child (unless otherwise noted below) when he or she will be playing outside. A brand of insect repellant is purchased and provided by Pebble Pond Preschool for use on children. If my child needs a different brand, I am responsible for providing the center with a substitute. I understand that insect repellant will be applied to exposed skin, including but not limited to the face, neck and bare shoulders, arms and legs (inquire with the Director for the current brand of insect repellant used).

If I do not want insect repellant applied to my child, or if I prefer to provide a different insect repellant than the center provides, I have indicated this by initialing the appropriate statement below.

_____ I do not want insect repellant applied to my child's skin.

_____ I will provide an insect repellant that is different from what the center uses. (The sunscreen I provide will be stored at the center)

Brand of insect
repellant _____

I understand this service is an accommodation for me and I will not hold the staff, Director, or Pebble Pond Preschool liable for the proper administration of the items listed on this page or for any adverse effects of their use.

Parent/Guardian Signature

Date