

CENTER FOR EARLY EDUCATION AND CARE
University of Massachusetts Amherst

SUNSCREEN / INSECT REPELLENT
PERMISSION FORM

Parents sign below to give permission for CEEC staff to apply your own product to your child as needed during the day.

Child's Name: _____ (please print)

Parent Provided Sunscreen

I have provided the following sunscreen product and authorize the staff of the Center for Early Education and Care to apply it to my child as needed.

Product Name: _____

parent signature

date

Parent Provided Insect Repellent

I have provided the following insect repellent product and authorize the staff of the Center for Early Education and Care to apply it to my child as needed.

Product Name: _____

parent signature

date