

TOPICAL PREPARATIONS (PREVENTIVE) PERMISSION FORM

Child's Name: _____

Parent/Guardian Name: _____

Moisturizing lotion / Cream / Lip Balm

I give my permission for the staff at Peace With Christ Early Learning Center to assist with applying skin lotion/cream/ lip balm to my child. I understand I must provide the product in the original over-the-counter container labeled with my child's name. It is my responsibility to check the list of ingredients of this product to ensure my child is not allergic to it. Skin lotion/cream/balm will not be applied to any broken skin or if a skin reaction has been observed. Any skin reaction observed by staff will be reported promptly to the parent/guardian.

Name of product(s): _____

Special Instructions: _____

Parent Signature

Date