

TTS Sun Safety Permission Form

| Please provide the following materials and give our staff permission to use the indicated n your child stay safe in the sun while in our care: | neasures to help |
|---|------------------------------|
| I,, the parent/guardian ofsupply the following for my child/children: | agree to |
| Hat that shades the face, ears, and neck. (If parent/guardian chooses) Child-sized sunglasses (If parent/guardian chooses) Broad-spectrum sunscreen (SPF 15 or greater) or authorize the use of sunscreen TTS. Please initial your choice: | |
| I give permission for my child to receive applications of sunscreen following the manufacture instructions. I understand that sunscreen will be applied by a parent/guardian before arriving program. Sunscreen will be applied by staff at morning and afternoon snacks. Sunscreen 15-30 minutes prior to going outside and every 2 hours as recommended by the manufact prevents children from going outside, sunscreen may not be applied. | ng at the will be applied |
| Parent/Legal Guardian (Print) | |
| Parent/Legal Guardian (Sign) | |
| | |

*Sun Safety Permission Form shall remain in effect unless a member of management receives written changes.