

**FAITH CHILD CARE, INC.
AUTHORIZATION TO ADMINISTER
DIAPER OINTMENT, SUNSCREEN, AND/OR INSECT REPELLANT**

Please complete all that pertain to your child named below.

The staff of Faith Child Care, Inc. has my permission to apply the following diaper ointment, _____, as needed for diaper rash, on my child,

(name of ointment)

_____. This ointment will be provided by me.

(child's name)

(parent's signature)

(date)

.....

The staff of Faith Child Care, Inc. has my permission to apply center purchased sunscreen: Coppertone Water Babies SPF 50 Maximum Sun Block for children under age 2 and NO-AD SPF 45 Maximum Sun Block Lotion for children over age 2 on my child, _____, as needed to prevent sunburn.

(child's name)

This sunscreen is purchased by the center in accordance with our DHFS exception.

(parent's signature)

(date)

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The staff of Faith Child Care, Inc. has my permission to apply the following insect repellent, _____, on my child, _____,

(name of repellent)

(child's name)

as needed to prevent insect bites. This repellent will be provided by me.

(parent's signature)

(date)