



## PERMISSION FOR SUNSCREEN APPLICATION



I hereby give my permission for the staff from Beverly Hills Academy to apply the sunscreen I have provided on my child when needed.

Child's name \_\_\_\_\_

Type or brand name of sunscreen: \_\_\_\_\_

From: \_\_\_\_/\_\_\_\_/\_\_\_\_ To: \_\_\_\_/\_\_\_\_/\_\_\_\_

The sunscreen should be provided in the original container, with a valid expiration date, where applicable, labeled clearly with the child's name, and given directly to a teacher. *The sunscreen in aerosol form works best!*

**Special Instructions:**

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\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Today's Date)