

Authorization Form for Sunscreen Provided by Mountaintop

INSTRUCTIONS:

This form must be completed by the parent/guardian to authorize the use of:

Sunscreen

Mountaintop Montessori has my permission to apply the non-prescription over-the-			
counter (OTC) skin product listed below to my child,			
, , ,			(Child's name)
Product Name: <u>thi</u>	nksport SPF 50+		
Known Adverse Reactions (if any): _			
This authorization is effective from:	August 28, 2023 (Start date)		August 19, 2024 (End date)
All OTC products must:			
 Be in the original container and Be used according to the manu Not be used beyond the expiration 	ıfacturer's recommendat		
Sunscreen:			
 Must have a minimum sunburne Shall be inaccessible to childre Children nine years and older needs 	n under 5 yrs. & children	in therape	
Parent's Signature:		D	ate: