



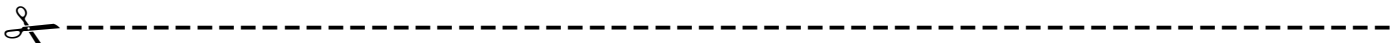
Permission to Apply Sunscreen

I give permission for the staff at Pepper Valley Learning Center to apply *SPF RX Brand SPF 40 Broad Spectrum Sunscreen to my child's exposed skin.

Child's name: _____

Parent's Signature: _____

*sunscreen provided by Pepper Valley Learning Center



Permission to Apply Sunscreen

I give permission for the staff at Pepper Valley Learning Center to apply the sunscreen that I have provided to my child's exposed skin.

Child's name: _____

Parent's Signature: _____

*Sunscreen provided by parent