



## SUNSCREEN and OTC OINTMENT PERMISSION FORM

Sunscreen and OTC ointments may be reapplied to children by SDFAS staff members with authorization from the parent/guardian according to the manufacturer's instructions for a period not to exceed one year.

Parents/guardians agree to apply sunscreen to their child prior to the student arriving at school. This authorization is intended only for reapplication of sunscreen.

Parents/guardians must place **this completed form and the desired sunscreen or OTC ointment in its original packaging in a ziplock bag labeled with the child's full name**, and communicate directly with teachers regarding the reapplication request.

I further agree to hold harmless San Diego French-American School and their staff, against all claims as a result of any and all acts performed under this authority and according to the instructions below.

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

Start Date \_\_\_\_\_ End Date \_\_\_\_\_ (Not to exceed 1 year)

Name of sunscreen or OTC ointment \_\_\_\_\_

When sunscreen or OTC ointment should be reapplied \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_