



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Sunscreen Permission Form

Child's Name _____ Grade Entering Fall 2019 _____

I give my permission for the camp staff at Piedmont Family YMCA Summer Day Camp to apply Rocky Mountain SPF 30 Kids Broad Spectrum Sunscreen to my child, as specified below, when he or she will be playing outside and on swimming field trips.

I further understand that sunscreen may be applied to exposed skin, including but not limited to the face, tops of ears, nose, bare shoulders, arms, and legs.

The YMCA Staff cannot apply the sunscreen except in the presences of multiple staff.

I have checked all applicable information regarding the type and use of the sunscreen for my child:

- Staff may apply one-eighth (1/8) of an ounce of Rocky Mountain SPF 30 Kids Broad Spectrum Sunscreen to my child as described above.

Please note any adverse reactions:

Parent's or Guardian's Full Name (Please Print): _____

Parent's or Guardian's Signature: _____ Date: _____

Office Use

Date Received: _____

Staff Initials: _____