PHYLLIS BODEL CHILDCARE CENTER AT YALE SCHOOL OF MEDICINE INC.

367 Cedar Street, New Haven, CT. 06510 Phone: 203-785-3829 Fax: 203-785-3827

SUNSCREEN

IT IS RECOMMENDED THAT ALL CHILDREN IN THE PROGRAM HAVE SUNSCREEN APPLIED BY THE PARENT IN THE MORNING PRIOR TO SCHOOL.

All parents must fill out the <u>PARENT/GUARDIAN AUTHORIZATION FOR THE</u> ADMINISTRATION OF SUNSCREEN.

- Please be sure to completely fill out the form including.
 - 1. Your complete child's name and address.
 - 2. Name of sunscreen that you supply the program should be written here.
 - 3. Please review the pre-printed directions related to the amount, area of application and time.
 - 4. If you agree that this is how you would like the sunscreen applied, review, sign and date the bottom of the form.
- Please bring in a new, unopened container of sunscreen that you have listed in #2 of the Authorization Form.
- Please label the sunscreen with your child's first and last name.
- Sunscreens may not be shared among siblings; each child needs their own Authorization form.