

# Over-the-Counter Products Permission Form

Child's Name: \_\_\_\_\_

Date: \_\_\_\_\_

I give permission to St. John Bosco Children's Centre to use the following over-the-counter products according to the parent's desired use.

\* Items must be supplied by parents. All items must be in the original container clearly labelled with the child's name.

- ✓ Sunscreen
- ✓ Insect Repellent
- ✓ Diaper cream
- ✓ Lip balm
- ✓ Hand Sanitizer
- ✓ Moisturizing skin lotion



Parent Signature : \_\_\_\_\_