



**SUMMER SEASON PERMISSION SLIP**

DUE TO THE HEAT OF THE SUMMER & THE ANNOYANCE OF TEXAS MOSQUITOES, WE WILL NEED EACH CHILD TO HAVE ON SUNSCREEN & MOSQUITO REPELLENT AS NEEDED.

PLEASE SIGN - TO GIVE US PERMISSION TO USE THE SCHOOLS SUNSCREEN & INSECT REPELLENT WHEN THEY DON’T ALREADY HAVE IT ON OR TO GIVE US PERMISSION TO APPLY THE ITEMS YOU SUPPLY.

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| --- | --- |
| MY INSECT REPELLENT: | MY SUNSCREEN: |
| KKAPVA INSECT REPELLENT:**ANY BRANDS AVAILABLE IN STORES** | KKAPVA SUNSCREEN:**ANY BRANDS AVAILABLE IN STORES** |

* I **DO** GIVE PERMISSION TO KKAPVA TO APPLY MY PERSONAL INSECT REPELLENT & MY PERSONAL SUNSCREEN ON MY CHILD. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I **DO** GIVE PERMISSION TO KKAPVA TO APPLY THEIR INSECT REPELLENT & THEIR SUNSCREEN ON MY CHILD.

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* I **DO NOT** GIVE PERMISSION TO KKAPVA TO APPLY ANY INSECT REPELLENT OR SUNSCREEN ON MY CHILD. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MY CHILD(REN)S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

