

**Topical Nonprescription Medication Permission**

(Sunscreen, insect repellent, ointment cream for example)

I, \_\_\_\_\_ give permission to Brite Beginnings Childcare Center LLC to give my child,  
\_\_\_\_\_, topical nonprescription medication.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Photo Release**

I, \_\_\_\_\_ give permission to Brite Beginnings Childcare Center LLC to take photos of  
my child, \_\_\_\_\_, to use as they choose and we will not be compensated for the usage.  
Photos could be used for promotions, Facebook page, webpage, or newspapers for example.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_