

CORPUS CHRISTI CATHOLIC SCHOOL

Building the Body of Christ One Student at a Time.

Permission to Apply Sunscreen

Child's Name: _____ Date: _____

I give permission to the staff at Corpus Christi Catholic School to apply sunscreen to my child in the case of extended outdoor activities. I understand that sunscreen will be applied to exposed skin.

I have checked ALL of the applicable information regarding the application of sunscreen to my child:

- ☐ I have provided sunscreen for my child's use
- ☐ I am using a sunscreen product that has been made available at the school. Name of product/brand: _____
- ☐ I have reviewed the entire ingredient list on the sunscreen packaging and my child does not have any known allergies to the sunscreen being used.

OR

- ☐ I am applying sunscreen to my child.

Parent/Guardian Signature: _____

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