



## Basic Care Items Permission Form

I, the undersigned, do hereby grant permission to Guiding Star CDC staff to apply the following topical ointments supplied by myself to my child, \_\_\_\_\_.  
These items shall be provided by the parents. The center does not have any of these items on hand for general use.

Child's Classroom: \_\_\_\_\_

Sunscreen Name: \_\_\_\_\_

Insect Repellant product: \_\_\_\_\_

Diaper Cream: \_\_\_\_\_

Lip ointment/balm: \_\_\_\_\_

Dry skin lotion: \_\_\_\_\_

Parent/guardian signature \_\_\_\_\_

Date \_\_\_\_\_

Center Director Signature \_\_\_\_\_

Date \_\_\_\_\_