Lutz Sunscreen Permission Form

Please apply sunscreen to your child(ren) prior to drop off. As needed throughout the day sunscreen will be applied when being outside. Sunscreen will be applied to exposed skin including face, tops of ears, and bare shoulders, arms. leas, and feet prior to sun exposure. I, _____the parent/guardian of _____ attending the Lutz Nature Summer Camp (2022) have checked off the following that apply: ☐ I do not know of any allergies my child has to sunscreen. ☐ I will provide sunscreen for my child(ren). ☐ My child(ren) will apply their own sunscreen. ☐ My child(ren) requires staff assistance when applying their sunscreen. ☐ In the event that my child(ren)'s sunscreen is unavailable they may use a different sunscreen provided by the Lutz. ☐ My child(ren) has an allergy to some sunscreens. Please use only the following brand(s) and type(s) of sunscreen: ☐ For medical or other reasons, please do not apply sunscreen to the following areas of my child(ren)'s body: Child's Name(s): ______ Parent/Guardian Signature: ______ Date: _____ Parent/Guardian Printed Name:

Relationship to Child(ren):