

Sunscreen and Insect Repellent Authorization Form (SSIRA)

I give Martin Luther Child Development Center permission to offer:

Sunscreen: Brand _____ Strength _____

I authorize the center to apply sunscreen to my child Yes No

I authorize the center to allow my child to self-apply sunscreen Yes No

Insect Repellent: Brand _____ Strength _____

I authorize the center to apply repellent to my child Yes No

I authorize the center to allow my child to self-apply repellent Yes No

To: _____
(name of child)

As needed for the _____ season.

Parent/Guardian Signature: _____ Date: _____

(If you would like Martin Luther staff to offer sunscreen/repellent, please bring in sunscreen/repellent along with the completed form to the childcare office.)