

Glendale Early Learning Child Care Centre
905-346-1301
glendale@vaxxine.com

PERMISSION FOR THE USE OF SUNBLOCK

I, _____, hereby authorize the staff of
Glendale Early Learning to apply sun block that I have provided for my child
_____, as needed. I understand that it must be in
its original container and clearly labelled with my child's full name and must be
applied by parent in the morning before coming to childcare.

Parent Signature: _____

Date: ____/____/____

Supervisor Signature: _____

Date: ____/____/____