



Sunscreen Authorization Form

(Program-Provided/ Bulk Sunscreen)

Name of Child/Children	Date of Birth <small>(Do not apply on infants 6 months & younger without written permission from health care provider)</small>
Start Date: Immediate	Stop Date: Continue use until notified by parent/guardian
Times to be Applied: Before going outdoors	Special Instructions:

I authorize the use of the following "program-provided" sunscreen products for my child.

Name of Sunscreen & SPF: Coppertone Kids Sunscreen - SPF 50 Coppertone Kids Sport - SPF 50 Equate Kids Sunscreen - SPF 50 Member's Mark Sport - SPF 50 Up & Up (Target) - SPF 50 Clear spray	Active Ingredients: Avobenzone, Homosalate Octisalate, Oxybenzone Octocrylene Product-specific label information is available in the information center
Possible Side Effects: May stain some fabrics	Other Label Information: When using this product keep out of eyes, Rinse with water to remove.

Parent/Guardian Signature

Date

 Daytime Phone Number

Reason for medication: Protection from sun
 Amount to be given: Cover exposed areas of skin
 Route: topical Storage: Room temperature