

I give The Journey Begins staff permission to administer

Sunscreen\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and/or Insect Repellent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Brand Brand

 to my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ before outside play time. Name

I have brought the repellent from home and labeled it with my child’s name; I take full

responsibility for any adverse reactions my child may have as a result of this/these

products.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature Date



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