



Best Buddies Learning Center

1) I give Best Buddies Learning Center written permission to apply sunscreen/bug spray on a daily basis as needed during the summer months.

Parents name: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date: \_\_\_\_\_

Sunscreen name: \_\_\_\_\_

2) Diaper cream name: \_\_\_\_\_

Parent signature: \_\_\_\_\_

3) I, \_\_\_\_\_

(parent names)

give my permission for BBLC to have my child's picture on Facebook

(do / do not)

Date: \_\_\_\_\_