

## Authorization Form for Non-prescription Over-the-Counter Skin Products Licensed Child Day Centers

**VDSS Division of Licensing Programs Model Form** 

## **INSTRUCTIONS**:

This form must be completed by the parent/guardian to authorize the use of:

- Sunscreen
- Diaper ointment or cream
- Insect repellent

	nas my permission to apply the non-prescription
(Name of Provider)	
over-the-counter (OTC) skin product listed below	to my child,(Child's name)
Product Name:	
Known Adverse Reactions (if any):	
All OTC products must:	
	rided by the parent, labeled with the child's name ecommendation and instructions for application e of the product
<ul> <li>Sunscreen:         <ul> <li>Must have a minimum sunburn protect</li> <li>Shall be inaccessible to children under</li> <li>Children nine yrs. and older may self a</li> </ul> </li> </ul>	5 yrs. & children in therapeutic or special needs programs
<ul> <li>Diaper ointment/cream and Insect repellents:</li> <li>Shall be kept inaccessible to children</li> <li>Record of use shall be kept that include reactions</li> </ul>	es child's name, date, frequency of application, and any adverse
This authorization is effective from:(Start	until:t date) (End date)
Parent's Signature:	Date:

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