



Dear Parents,

If you would like us to apply sunscreen and/or bug spray to your child, please send a bottle (labeled with their name), and this signed permission slip.

Thank you,

The Bobbie Noonan's Staff

Child's Name : _____

_____ Please apply the sunscreen I have provided when my child plays outdoors.

_____ Please apply the insect repellent I have provided when my child plays outdoors.

_____ My child does not need to wear sunscreen and/or insect repellent.

Parent's Signature