

SUNSCREEN

Parent Selection Form



Child's Name: _____
Today's Date: _____ Date of Birth: _____

New Creations will provide sunscreen for all children over the age of 6mo unless otherwise requested by their parent/guardian. Please select your preference.

FOR CHILDREN AGED 6 months – 12 months

- New Creations may use the provided sunscreen on my child. I understand New Creations will purchase Neutrogena Pure and Free Baby Sunscreen, SPF 50.
- I have provided sunscreen to New Creations and labeled it with my child's first and last name.
The sunscreen brand I have provided is: _____
The SPF of the provided sunscreen is: _____
NOTE: Aerosol sun screens are not allowed per licensing.

FOR CHILDREN AGED 12 months and older

- New Creations may use the provided sunscreen on my child. I understand New Creations will purchase Equate or Coppertone Brand Sunscreen, SPF 50.
- I have provided sunscreen to New Creations and labeled it with my child's first and last name.
The sunscreen brand I have provided is: _____
The SPF of the provided sunscreen is: _____
NOTE: Aerosol sun screens are not allowed per licensing.

I understand that this form will be applicable for 1 year from the date signed below. Next Spring, I will receive a new Sunscreen Parent Selection Form to update my preferences at that time.

Parent / Guardian Signature

Date