



ZEELAND CHRISTIAN SCHOOL

Sunscreen Consent

Family Games are scheduled for Tuesday, May 30, 2023. Please **remember to apply sunscreen** to your student prior to school. If you wish to have your student bring sunscreen **to reapply while at school, please complete this form** for your student to **turn into their teacher on Tuesday**.

I/We request that _____ be allowed to self-carry and self-administer non-aerosolized (ideally, non-spray) sunscreen that they will take from home, for use during Family Games the week of May 29-June 2, 2023. I/We certify that I/we have legal authority to consent to medical treatment for the above named student, including the administration FDA approved over-the-counter topical substances at school. I realize I may withdraw my request/consent in writing at any time. My student will self-administer/self-carry their sunscreen. I agree that in order for them to do so, I will:

- Instruct my student to never share their medication with another person.
- Have my student carry their sunscreen in its original, properly labeled over-the-counter container, on which will be written their name and date of birth.

Signature _____ Date _____