



OVER-THE-COUNTER PRODUCTS AUTHORIZATION FORM

- This form must be completed by the parent/guardian to authorize the use of:
 - Sunscreen
 - Diaper Ointment or Cream
 - Insect Repellent
 - Non-prescription Creams/Lotions/Balms
- ALL OTC products must:
 - Be in the original container and labeled with the child's name
 - Be used according to the manufacturer's recommendations and instructions for application
 - Not be used beyond the expiration date of the product
- Sunscreen and Non-prescription Creams/Lotions/Balms:
 - Must have a minimum sunburn protection factor (SPF) of 15
 - Shall be inaccessible to children under 5 years
 - Children nine years and older may self-administer sunscreen if supervised
- Diaper Ointment/Cream and Insect Repellents:
 - Shall be kept inaccessible to children
 - Record of use shall be kept that includes child's name, frequency of application and any adverse reactions

To be completed by parent/guardian

_____ (Child's First and Last Name)

_____ (Date of Birth)

_____ (Gender)

The Learning Village Montessori has my permission to apply the following non-prescription over-the-counter (OTC) skin product:

OTC Skin Product name: _____

Time(s) to be administered: _____

Known adverse reactions (if any): _____

This authorization is effective from: _____ until: _____ *(not to exceed one year)*
(Start Date) (End Date)

Parent's or Guardian's Signature: _____ Date: _____