



# Non-Prescription Over-The Counter Skin Products Authorization Form

## Instructions:

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

- Sunscreen
- Diaper Ointment or Cream
- Insect Repellent
- Lotion
- Chapstick
- Other \_\_\_\_\_

Westhampton Day School has my permission to apply the non-prescription 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:

- Be in the original container and, if provided by the parent, labeled with the child's name
- Be used according to manufacturer's recommendation and instructions for application
- Not be used beyond the expiration date of the product

## Sunscreen

- Must have a minimum sunburn protection factor (SPF) of 15
- Shall be inaccessible to children under 5 yrs. & children in therapeutic or special needs programs
- Children nine yrs. 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, date, frequency of application, and any adverse reactions

This authorization is effective from: \_\_\_\_\_ until: \_\_\_\_\_  
Start Date End Date

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_