

Scituate Public Schools
Special Event Sunscreen Permission

In the state of Massachusetts, sunscreen is considered a medication, and may not be used without a physician's order and parent/guardian permission.

Your student will be attending an outdoor special event, _____ on _____. Please make sure to apply sunscreen to your student prior to coming to school. Also, please consider the use of UV-protective clothing and hats. There will be mineral-based, non-aerosol sunscreen available *for your student to self-apply*. We must have your permission for your student to use and/or self-apply the sunscreen that will be supplied by the district. If you would like your student to have this permission, please complete this form and return it to school *at least two school days prior to the scheduled event*. If a student is not able to self-apply sunscreen, they will not be allowed to use it unless a staff member is available to apply it.

Student Name: _____ Date of Birth: ___/___/_____ Grade: _____

1) Please list any health concerns or issues that the school nurse should be aware of related to the administration of sunscreen: _____

2) My son/daughter is known to have the following allergies related to the sun and/or sunscreen: _____

| Parent/Guardian Consent | |
|--|---|
| | This section must be completed in order to use sunscreen at this event |
| x _____ Initial Here | <p>I have initialed to give permission for my child to use and self-apply the school provided mineral-based, non-aerosol sunscreen. This is in accordance with the standing physician's order for the Scituate Public Schools prescribed by Dr. Katie McBrine, School Physician.</p> <p>*Please contact your school nurse if you would like the complete ingredient label of the mineral-based sunscreen that will be available for use at this event.</p> |
| Please initial the sections above, and sign below to indicate your consent. | |
| Signature of Parent/Guardian: _____ Date _____/_____/_____ | |

