



A Place to Grow at Harmony Place
55 Briggs Way
Durham, NH 03824

Permission to Apply Topical Lotions

I, _____ (Parent/Guardian's name) give permission to the staff of A Place to Grow to apply the following topical lotions to _____ (Child's name). Parents must apply bug spray and sunscreen in the morning before drop off. Sunscreen and bug spray will be applied in the afternoon, or as needed. Diaper creams are applied as needed.

I have provided the following lotions/spray and have clearly labeled them with my child's name and expiration date.

- Sunscreen brand _____
- Bug Spray brand _____
- Diaper rash cream brand _____

This permission is granted indefinitely, unless a new form has been received and signed by the parent/guardian.

Signed (Parent/Guardian) _____

Date _____

In the event that a lotion such as sunscreen, bug spray, or diaper rash cream has not been provided, I give permission to A Place to Grow staff to use an alternative if, using their best judgment, it is in the best interest of the child at the time.

Signed (parent/guardian) _____

Date _____