



## Topical Cream/Ointment/Sunscreen Permission Form (Parent Provided)

Child's Name: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, give the staff at Good Earth permission to use,  
\_\_\_\_\_ on my child for skin protection/ rash / condition. I have  
used this product previously without any adverse reaction to my child's skin.

Instructions regarding application:

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Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_