



## Sunscreen and Insect Repellent Authorization Form

**Child's Name:** \_\_\_\_\_

**Date of Birth/Age:** \_\_\_\_\_

**Spring Start Date:** March 30, 2026

**Summer Start Date:** June 15, 2026

**Stop Date:** (Note: Authorization can only be valid for 6 months): \_\_\_\_\_

**Times to be applied:** Prior to sun exposure

**Storage:** Room temperature

**Special Instructions** (including previous sunscreen reactions):  
\_\_\_\_\_

**Please indicate choices below:**

**Sunscreen Brought from Home (Please follow instructions below)**

Please place this completed form in a resealable Ziplock bag with sunscreen and insect repellent from home. Please label both the bag and the contents with your child's name. The bag will remain at room temperature at camp and will be returned at the end of the week.

**Name of Sunscreen & SPF:**  
\_\_\_\_\_

**Insect Repellent Brought from Home (Please follow instructions below)**

Please place this completed form in a resealable Ziplock bag with sunscreen and insect repellent from home. Please label both the bag and the contents with your child's name. The bag will remain at room temperature at camp and will be returned at the end of the week.

**Name of Repellent:**  
\_\_\_\_\_

**I authorize the use of the above indicated sunscreen and/or insect repellent on my child.**

**Parent/Guardian 1 :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian 2 :** \_\_\_\_\_ **Date:** \_\_\_\_\_