

ATTACHMENT 1
Authority for staff to administer sunscreen

Authority for staff to administer sunscreen provided by the service

I, _____, _____ permission for the Shine Bright EYM staff to support my child to apply, as appropriate, SPF 30 (or higher broad-spectrum, water-resistant sunscreen to all exposed parts of my child's body.

(Name of child)

Signature (parent/guardian)

Date

Authority for staff to administer sunscreen provided by the parent/guardian

I, _____, _____ permission for the Shine Bright EYM staff to support my child to apply, as appropriate, to all exposed parts of my child's body the sunscreen that I have supplied and labelled with my child/children's name. This sunscreen is an SPF 30 (or higher) broad-spectrum, water-resistant sunscreen. I understand that this sunscreen will be kept at the service.

It is my responsibility to ensure there is always an adequate supply of this sunscreen at the service.

(Name of child)

Signature (parent/guardian)

Date