

Child's Name:	Date of Birth:
appropriate, from January 1, 2025 throws as instructed on the container and must the products as necessary to Children U	nission to apply the following products to my child when needed and ugh December 31, 2025. I understand that the products will only be used to be in the original container that bears those instructions. I will provide Unlimited and will clearly label the product container with my child's will apply sunscreen to my child in the morning and Children Unlimited
Sunscreen (must be non-aerosol).	. Name of product:
Insect Repellent (must be non-aer	rosol). Name of product:
Neosporin or other first aid cream	n or gel. Name of product:
Diaper cream. Name of product:	
Petroleum jelly. Name of product	t:
Hand/body lotion. Name of produ	uct:
Lip balm. Name of product:	
Teething reliever. Name of produ	ıct:
Other:	
A pacifier I provide is permitted in	
I authorize the teachers at Children Undeep breathing and yoga.	limited to help my child learn self-regulation through techniques such as
Special instructions or notes:	
Parent/Guardian's Signature:	Date: