

Topical Products

Parent Authorization

I authorize Anchorage Montessori School to use the topical product(s) listed below for:

Child's Name (Last Name, First Name)

Note to Parents: Alaska child care regulations require that non-prescription medication and health products only be administered under the following conditions:

- Written permission from the parent is obtained
- Topical product must be kept in the original container and labeled with the child's name.
- Topical products are only used at the dose, duration or method of administration specified on the manufacturers label.
- Topical products may be supplied by the facility or brought in by the parent.

Item	Name of Product as listed on label	Instructions for application (as needed, at each diaper change, etc)
Sunscreen		As Needed
Insect Repellent		As Needed
Lotion/Cream		
Lip Balm		
Insect Sting Relief (only first aid ointment, Calamine lotion, baking soda, or meat tenderizer)		
Diaper Ointment		

Parent's Signature: _____ Date: _____

Permission to administer topical products obtained over the telephone from:

Parent/Guardian: _____ Time: _____ Date: _____

Caregiver who place call: _____