

## Wyomissing Valley Preschool Summer Camp Sun Screen

Sunscreen is considered a toxic over the counter medication; Therefore, it may not be accessible to children unless under the direct supervision of staff. **(NO SUNSCREEN IN BACK PACKS)** WVP Summer Camp will provide sunscreen to be applied while at camp. All sunscreen will be stored in locked container. **Children should come to camp with their 1<sup>st</sup> application of sunscreen pre-applied at home.**

I give my child \_\_\_\_\_ permission to have a staff member apply spray on sunscreen throughout the day while at camp.

\_\_\_\_\_ (initial) I understand that WVP Summer Camp will provide a 30 SPF (or higher) spray on sunscreen

\_\_\_\_\_ (initial) I understand that I am strongly encouraged to provide hats and cover ups, that children should come to camp with their 1<sup>st</sup> application of sunscreen pre-applied at home, and that WVP Summer Camp will not be held responsible for sunburns.

\_\_\_\_\_ (initial) I do not know of any allergies my child has to sunscreen.

For Medical or other reasons, please do not apply sunscreen to the following areas of my child:

\_\_\_\_\_

Parents may provide their own personal sunscreen ONLY if medically necessary and a medical log slip MUST be completed by the parents.

## Wyomissing Valley Preschool Summer Camp Bee Sting Wipes

Bee Sting Wipes are considered a toxic over the counter medication. The staff at summer camp keep them in a secured area that not accessible to students.

\_\_\_\_\_ (initial) I give permission to staff to use a "bee sting medical wipe" in the event my child is stung.

\_\_\_\_\_ (initial) I DO NOT know of any allergies my child has to Bee stings and/or the "bee sting medical wipe"

\_\_\_\_\_ (initial **OR** mark N/A if Nonapplicable) **MY CHILD IS ALLERGIC TO BEE STINGS** and we have Epinephrine to be used.

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

**\*This form is to be signed at Calvary Care/WVP at time of registration payment.**