

***CONSENT TO APPLY BUG SPRAY***

**We / I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ parents / legal**

**guardians of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_name of child**

**agree to allow Sunshine House Preschool Inc. to apply bug spray (bug repellant) to my child when they go outside on the playground.**

**The bug repellant may be brought in by myself or other bug spray /bug repellant that is on the premises of Sunshine House Preschool. The spray will be applied only to areas of the body that is exposed excluding the head or face area.**

**This consent for is good for the duration of my child’s attendance at Sunshine House Preschool.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent(s) / Guardian’s Signature Date**

**I do not wish to give consent to have bug spray / bug repellant apply to my child.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent(s) / Guardian’s Signature Date**