

Thomaston Recreation Department

Sunscreen Permission Form

I, \_\_\_\_\_, hereby give my permission to the Thomaston Recreation Department's, Summer Playground staff, to administer or apply a sun blocking agent to my son/daughter, \_\_\_\_\_, upon my request.

In the unlikely event of illness, I hereby waive liability, as the parent/guardian of the above child. I will hold harmless the Thomaston Recreation Department, The Town of Thomaston, and their agents, or employees.

\_\_\_\_\_  
(Parent/Guardian signature)

\_\_\_\_\_  
(Date)