

SUNSCREEN PERMISSION FORM

Send application, deposit and other correspondence to:

Chuck Washer, Director
High Meadow Day Camp
14 Lindsay Circle
North Granby, CT 06060

Director's Phone: 860-653-9325

Director's Fax: 860-653-7055

Email: director@highmeadowdaycamp.com



Administration of Sunscreen

_____ Yes, I give the employees of High Meadow Day Camp permission to apply sunscreen to my minor child(ren).

_____ No, I do not wish for my minor child(ren) to have sunscreen applied by day camp personnel.

Camper(s) Name(s)

Grade Entering in Sept

Parent Name (printed) _____

Parent Signature _____

Date _____