

## Sick and Medication Policy:

Only prescription medicine will be given to your child.

Medication is given at noon. Please be sure to sign an authorization form (will be provided by teacher)

If medication does not have a prescription label with your child's name, you MUST get a note from your doctor.

If your child is sent home ill and a doctor's visit is not necessary, your child must remain home for a 24 hour "get-well" period. Please have a back-up person available to pick up your child if you cannot. If your child has been seen by a doctor, please bring a note from the doctor stating that your child is not longer contagious and is well enough to attend.

THE ABOVE IS REQUIRED BY CALIFORNIA DEPARTMENT OF HEALTH.

### GUIDELINES WE FOLLOW WHEN SENDING A CHILD HOME:

FEVER  
HEAVY OR EXCESSIVE COUGHING  
COLORED DISCHARGE FROM NOSE  
VOMITTING OR DIARRHEA  
ANY UNUSUAL RASH

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

Thank you for your cooperation!

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### SUNSCREEN UTILIZATION PERMISSION FORM:

Date: \_\_\_\_\_ Name of child: \_\_\_\_\_

As the parent/guardian of the above child, I give my permission for staff at Redeemer Lutheran School to apply sunscreen product of SPF 15 or higher to my child, as specified below, when he or she will be engaging in outdoor activities especially during the months of April through September and between the daily times of 10am to 4pm. I understand that sunscreen may be applied to exposed Skin, including but not limited to the face, tops of ears, nose, and bare shoulders, arms and legs.

Additionally, I have checked and /or indicated below my directives regarding the type and application of sunscreen.

\_\_\_\_\_ The staff of Redeemer may use the sunscreen of their choice, in keeping with applicable federal and state standards, except for the following (if specified): \_\_\_\_\_

\_\_\_\_\_ Only use the following type(s) / SPF of sunscreen: \_\_\_\_\_

\_\_\_\_\_ For medical or other reasons, please don't apply sunscreen to the following areas of my child's body: \_\_\_\_\_

Parent's full name (print): \_\_\_\_\_

Parent's signature: \_\_\_\_\_