



Non-Prescription Ointment Permission Slip

I give the staff at Over the rainbow Nursery School permission to apply the following ointments to my child. I have provided the ointment and it is labeled with my child's name. This signed permission slip is valid for one (1) year from the date it is signed.

Diaper Rash Ointment: _____

Anti-Bacterial Ointment: _____

Lip Balm for Chapped Lips: _____

Saline: _____

Child's Name: _____

Parent Signature: _____

Date: _____