



Annual Permission Slip 2025-2026

Child's Name: _____

Topical Ointment

1. I give permission for TPCDC teachers to apply the following throughout the day as needed: (Check as desired.)

☐ Sunscreen

☐ Bug Spray

☐ Diaper Cream

2. I will (please check BOTH):

☐ Apply the first application of sunscreen, bug spray, and/or diaper cream before drop off.

☐ Send in bottles of sunscreen, bug spray, and/or diaper cream labeled with my child's name.

3. Please note any special instructions for sunscreen, bug spray, or diaper cream application:

Swimming/Wading Activity

4. My child has permission to go in water up to their: (Check all that apply.)

☐ Knees

☐ Waist

☐ Chest

5. My child:

☐ Can swim

☐ Has taken swimming lessons. If so, how many years? _____

☐ Has permission to take a pool swim test, which allows for use of the diving board, slides, and/ or lazy river, with approval from a pool lifeguard and a TPCDC teacher.

Children may participate in swimming activities only according to their ability level, and if they cannot swim they will stay in water chest-deep or lower. I understand that the children will be supervised at all times by TPCDC staff. When not at TPCDC, only wading and swimming facilities meeting applicable local standards will be used.

Parent Signature: _____ Date: _____