## **Diaper Ointment Permission Slip for Infants and Toddlers**

| I give my permission for the Beautiful Savior Lutheran | Early Learning Center staff to |
|--|--------------------------------|
| apply diaper ointment to the diaper area of my child,_ | ·                              |
|  |                                |
| Parent/Guardian Signature                              | Date                           |
| Additional Comments or Instructions                    |                                |
|  |                                |
|  |                                |
|  |                                |
| Crib/Cot Permission Slip for Infants & To              | ·                              |
| during nap time.                                       |                                |
| Parent/Guardian Signature                              | <br>Date                       |
| Additional Comments or Instructions                    |                                |
|  |                                |
|  |                                |
|  |                                |
|  |                                |