

**Boys & Girls Club of Cape Cod Permission Slip**  
**(Sunscreen, Photography, Field Trips, Medical Treatment)**

**This permission Slip is for:** \_\_\_\_\_  
Print Campers Name

***Sunscreen:***

I give permission for my child to wear sunscreen. The Boys & Girls Club staff has permission to apply the sunscreen on my child. (Please clearly label the sunscreen with your child's name.) If my child does not have his/her own sunscreen I give the Boys & Girls Club staff permission to use a Sunscreen of SPF 30 or higher, provided by the Camp, for my child.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
(Date)

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***Photography:***

Occasionally, the opportunity will arise that photos may be taken of your child here at Summer Camp. These photos would be used for local advertising as well as in Boys & Girls Club of Cape Cod Publications. I give permission for photos of my child to be taken and used for the above stated purposes.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
(Date)

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***Field trips:***

I give permission for my child/children to participate in field trips through the Boys & Girls Club. In the event of inclement weather I understand the Camp may need to make trip changes and, when possible, will notify me ahead of time.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
(Date)

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***Medical:***

In the event of an emergency, I give permission for Boys & Girls Club Staff/Volunteers to seek appropriate medical attention.

\_\_\_\_\_  
(Parent/Guardian's Signature)

\_\_\_\_\_  
(Date)

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