**Little Folks School House**

**Authorization to Apply Hand Sanitizer**

Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_I authorize the staff at the Little Folks School House to apply Hand Sanitizer on my child’s hands in between the soap & water hand washing times

\_\_\_\_\_\_\_\_\_\_\_I do not want Hand Sanitizer applied to my child’s hands

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Signature Date*

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 *Signature Date*