

6435 Green Bay Road - Kenosha, WI – 53142 **Phone** (262) 942-4769 **Fax** (262) 942-4770

Ointment Consent Form

No Aerosol Allowed

Child Name:		
Name of Ointment/Lotion/Salve/Cream:		
Written instructions (when to apply, where to	apply, how much to use, etc.):	
Parent Signature:	Date:	

This consent expires 1 year after the date it was signed

