

Woodbridge Children's Center

**CONSENT FOR PICTURES:**

I, the undersigned parent or guardian of my child \_\_\_\_\_,

Authorize my child to be photographed while attending Woodbridge. Photographs will be of the children playing and interacting in the program and may be used in program promotional materials and on our website.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**APPLICATION OF SUNSCREEN:**

I, the undersigned parent or guardian of my child \_\_\_\_\_, authorize Woodbridge staff to apply sunscreen that I have provided as needed.

Signature \_\_\_\_\_ Date \_\_\_\_\_