

# Temple Emanuel Early Childhood Center



## Photo Release Form

I understand that Temple Emanuel Early Childhood Center may include photographs of students, staff and families on our website and other media materials.

I hereby give permission for photographs taken of my child at Temple Emanuel Early Childhood Center to be published in print or electronic media.

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Child's Name

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Parent/ Guardian Signature

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Date

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## **Sunscreen Application Permission Form**

I hereby give permission for the staff of Temple Emanuel Early Childhood Center to apply sunscreen on my child. I understand that I will supply the sunscreen to the school and that I must have a trial application at home, before sending it to school. I understand that an allergic reaction to sunscreen is possible and that the staff or representative of Temple Emanuel Early Childhood Center will not be held liable for any damage that my child may sustain as a result of applying sunscreen.

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Child's Name

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Parent/Guardian Signature

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Date