Early Childhood Care & Education Services, UCSB
Blanket Consent Form

Parent/Guardian’s Name: ____________________________ Child’s Name: ____________________________

Pictures

I hereby give permission for my child to have his/her picture taken at the Children’s Center for program publicity, including but not limited to displays, brochures and our webpage. No identifying information will be included with photos.

Parent/Guardian’s Signature: ____________________________ Date: __________

Reminder: Pictures will be taken of your child for classroom displays and to document your child’s development, as stated in the Contract.

Permission to Apply Sun Block

I give my authorization for UCSB Early Childhood Care and Educational Services to apply a sun block provided by the Center with UVB and UVA protection of SPF 15 or higher to exposed skin.

Parent/Guardian’s Signature: ____________________________ Date: __________

OR

I will provide the sun block, as described above, and authorize the Center to only apply the sun block I have provided.

Parent/Guardian’s Signature: ____________________________ Date: __________

Food Allergy/Sensitivity Consent

Please do not serve my child the following foods:

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<th>Allergy/Sensitivity</th>
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To help ensure that my child’s allergy/sensitivity requests are met, I give permission for my child’s information to be posted in a classroom location that is accessible to all staff. I understand that this location may be visible to other families.

Parent/Guardian’s Signature: ____________________________ Date: __________