



FOUNDATION FOR
Faces of Children

258 Harvard Street, #367
Brookline, MA 02446

617.355.8299 • info@facesofchildren.org • www.facesofchildren.org
www.facebook.com/facesofchildren • www.youtube.com/facesofchildren

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For persons OVER the age of 18:

I hereby certify that I am 18 or more years of age.

Adult 1 (please print): _____

Signature: _____ Date _____

Adult 2 (please print): _____

Signature: _____ Date _____

For persons UNDER the age of 18:

(If person is under age 18, consent must be given by parent or legal guardian.)

I hereby certify that I am the parent or legal guardian of the following child(ren) under the age of 18 _____
and give consent without reservations to the foregoing on behalf of him, her, or them.

Parent or legal guardian (please print): _____

Signature: _____ Date _____

Home Address: _____