

Volunteer Parental Consent and Agreement Form

This form is required for volunteers under the age of 18. Please complete, print, sign, and return this form prior to participating in any volunteer activities.

1. Volunteer Information

Volunteer Full Name:

Date of Birth:

Age:

Address:

Phone Number:

Email Address:

2. Parent or Legal Guardian Information

Parent/Guardian Full Name:

Relationship to Volunteer:

Primary Phone Number:

Email Address:

3. Emergency Contact Information (If different from Parent/Guardian)

Emergency Contact Name:

Relationship:

Primary Phone Number:

4. Parental Consent, Liability Release, and Medical Authorization

I, the undersigned, hereby certify that I am the parent or legal guardian of the volunteer named above, who is under 18 years of age. I hereby give my consent and permission for them to participate in volunteer activities with the organization.

I understand that the volunteer activities may involve physical exertion, transportation, or other risks. I release, waive, and discharge the organization, its directors, officers, employees, and agents from any and all liability, claims, or demands arising out of injury, illness, loss, or damage sustained by the volunteer during their participation in volunteer activities.

In the event of a medical emergency, I authorize the organization to obtain necessary medical treatment for my child if I cannot be reached immediately. I understand that I am responsible for any medical expenses incurred.

5. Photo and Media Release

I grant permission for the organization to use photographs, videos, or audio recordings of my child taken during volunteer activities for promotional, educational, or informational purposes.

Please type YES to agree, or NO to decline:

6. Signatures (Please print this document and sign below)

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Parent/Guardian Printed Name:

Parent/Guardian Signature: _____

Date Signed:

Volunteer Signature: _____

Date Signed: