

— VOLUNTEER —
SOUTHLAKE

In order for your child to become a volunteer with the **Volunteer Southlake** program, we need your consent and your involvement in helping him/her to have a productive experience. Please read and sign this parental consent form in order for us to continue our process of considering your child as a volunteer.

Name of Agency: *City of Southlake – Volunteer Southlake Program*

Name of prospective youth volunteer: _____

Birth Date: ____/____/____ **Address:** _____

I understand that my child, named above, wishes to be considered as a volunteer with the **Volunteer Southlake** program, and I hereby give my permission for him/her to serve in that capacity, if accepted by the City of Southlake. I understand that he/she will be expected to meet all of the requirements of the volunteer position, including attendance and adherence to Volunteer Southlake policies and procedures. I understand that he/she will not receive monetary compensation for the services contributed or be guaranteed of any future position with the city of Southlake. I further understand and agree that a volunteer, my child is not an officer, agent, or employee of the city of Southlake, and that my child's service in such activity shall not be construed or interpreted as such. I also acknowledge that this consent gives my child permission to be transported by City staff on trips necessary to the volunteer work.

I acknowledge that, on behalf of my child, I assume all responsibility and risk of my child's participating in the Volunteer Southlake program and agree to hold harmless and release the City of Southlake, its officers, agents and employees, from any and all claims and suits for property damage, loss, or personal injury, including death, sustained by my child in connection with my child's services, whether or not such damages or injuries are caused directly or indirectly by the negligence of officers, agents or employees of the City of Southlake. Furthermore, I hereby agree to indemnify, hold harmless and defend the City of Southlake, its officers, agents, and employees, from any and all suits, for property loss or damage and/or personal injury, including death, sustained by others by reason of my child's participating in the Volunteer Southlake program.

I certify that I have read this release thoroughly and that I understand its terms and conditions and that I make this release and waiver voluntarily and have not relied upon any representations made by the City of Southlake, its officers, agents, employees or volunteers. I further certify that I understand that in making this waiver of liability I am making a decision of substantial significance and am willing to assume such risks.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTOOD THE CONTENTS OF THIS DOCUMENT. UPON SIGNING YOU SIGNIFY THAT YOU HAVE READ, UNDERSTAND AND AGREE TO ALL TERMS CONTAINED HEREIN.

Parent/Guardian (Print): _____ **(Signature):** _____

Today's Date: ____/____/____ **Day Phone:** _____ **Evening Phone:** _____