

Parental Consent Form

For Volunteers 18 years of age and younger:

Parental Consent required if volunteer is under age 18

_____ has my permission to participate as a volunteer with AAIFP.
(Print name of minor)

By my signature below, I do release and indemnify, defend and hold harmless the Aurora Area Interfaith Food Pantry (AAIFP) from and against any and all claims, actions, suits, or proceedings of any kind or nature arising as a result of the actions of my child.

I also release the officers, staff, and Board of Directors of the Aurora Area Interfaith Food Pantry, without limitations, from damages, liabilities, penalties, costs, expenses, legal fees, and claims.

In the event of an injury, the parent/guardian authorizes Pantry staff to seek treatment for minor volunteers and to take other action should a medical emergency arise and waive and release my right for damages.

AAIFP accepts no liability for minor volunteers who leave the Pantry property without parental or guardian consent.

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Name (print): _____ **Relationship to Child** _____

Phone no.: _____

I have read and understand the above guidelines:

(Signature)

(Print Your Name and Relationship to Child)

(Date Signed)