



YOUTH PERMISSION FORM

Group Name: _____ Date of Volunteer Service: _____

Child's Name: _____ Parent/Guardian Name: _____

Address: _____ Child's Birth Date: _____

City: _____ State: _____ Zip: _____

Telephone: (h) _____ (w) _____ (m) _____

Please read the following agreement and sign below:

In connection with my child or ward's voluntary involvement in activities undertaken for, and with the participation and support of The Drake House, a non-profit charitable organization, I hereby agree, for myself, my heirs, assigns, executors and administrators to release and discharge The Drake House, and any partnering agency or school, its officers and directors, employees, agents and volunteers from all claims, demands and actions for injuries sustained to my child or ward's person and/or property as a result of his/her involvement in such activities, whether or not resulting from negligence, and I agree to release and hold The Drake House, and any partnering agency or school, its officers and directors, employees, agents and volunteers harmless from any cause or action, claim or suit arising therewith. I hereby attest that attendance and involvement in such activities is voluntary, that he/she is participating at his/her own risk, and that I have read the foregoing terms and conditions of this release. Furthermore, I grant permission for photographs, video and quotations from my child or ward during his/her involvement with The Drake House to be used to further promote volunteerism. In connection with the volunteering activities, The Drake House needs to collect personal information about your child or ward through our website. The Drake House requires your consent prior to collection, use or disclosure of any personal information about your child or ward. No personal information will be collected, used, or disclosed without your consent. If you consent, the personal information that may be collected from your child includes: their name, home address, age, email address. The potential disclosures of the personal information include (i) to third parties providing functions on our behalf (ii) as required by law and (iii) if specifically authorized by you. If you would like to know more about how we handle personal information, our full Privacy Policy can be found at: <http://thedrakehouse.org/privacy-policy>. You can provide your consent by signing this form.

Permission

I hereby give permission to my child or ward to participate in all activities in the program of The Drake House expressly and specifically acknowledging that those activities may include, but may not be limited, gardening, painting, planting, donation sorting, cleaning and organizing. I further acknowledge the risk of physical injury or damage to property as a result of my child's participation in the activities. I also give The Drake House permission to take my child or ward to the hospital in case of any emergency and to administer medication that I provide for my child. My child is capable of participating in these activities. I also give Drake House permission to collect, use and disclose my child or ward's personal information in accordance with our Privacy Policy.

I have spoken to my child about their responsibility to respect the identity of all residents of The Drake House and the need to keep any and all information about residents confidential.

I further attest that my child or ward has no allergies or special medical needs other than those listed below:

Emergency Contact information for day of event (if different from above)

Emergency Contact Name: _____ Relationship to child: _____

Emergency Contact Phone: (h)_____ (w)_____ (m)_____

Parent/Guardian's signature required

Date