



Parent/Guardian Permission Form

Santa Clara County
 750 Curtner Avenue
 San José, CA 95125-2118
 408.266.8866 ph
 408.266.9042 fax

San Mateo County
 1051 Bing Street
 San Carlos, CA 94070-5320
 650.610.0800 ph
 650.610.0808 fax

Dear Parent or Guardian:

Second Harvest Food Bank of Santa Clara and San Mateo Counties requires permission for anyone under the age of 18 to participate in any volunteer activity. All volunteers must be 16 years of age or older to independently volunteer on-site at Second Harvest Food Bank. A parent or guardian who is over the age of 21 must accompany high school volunteers 14 and 15 years of age.

In accordance with Second Harvest Food Bank's Youth Volunteer Policy, all volunteers will be required to follow the attached Volunteer Agreement, as well as the directives of our Volunteer Supervisors and other Staff members. **Youth volunteers must have a current Parent/Guardian Permission Form on file at the Second Harvest Food Bank in order to volunteer.**

All volunteers, including youth, are responsible for their own transportation to and from Second Harvest Food Bank activities.

Volunteer Activity:

Location:

I verify that _____ (**print youth's name**) is currently _____ years of age and

I, _____ (**print parent's/guardian's name**) give permission for him/ her to

participate in a Second Harvest Food Bank activity at the above location.

This permission slip is valid till June 30, 2008.

By my signature below, I do release and indemnify, defend and hold harmless, Second Harvest Food Bank of Santa Clara and San Mateo Counties 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 Second Harvest Food Bank of Santa Clara and San Mateo Counties, without limitations, from damages, liabilities, penalties, costs, expenses, legal fees, and claims.

Please print the following information:

Name: _____ Date: _____

Relationship to Youth: _____

Signature of Parent or Guardian: _____

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