

PARENTAL / GUARDIAN CONSENT FORM

In order for your child / teen to become a volunteer with the City of Phoenix Parks and Recreation Department, 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 / teen to be a volunteer.

Name of Agency: **City of Phoenix Parks and Recreation Department**

District / Section: Natural Resources Division

Name of prospective youth volunteer: _____ Birth Date _____

Address _____ Phone _____

Event / Activity / Program Name: _____

Description of anticipated volunteer work: Check if description is attached.

I understand that my child, named above, wishes to be considered for the volunteer experience described and I hereby give my permission for him/her to serve in that capacity, if accepted by the City of Phoenix. I understand that he/she will be provided with orientation and training necessary to assist in the performance of the volunteer duties and that he/she will be expected to meet all of the requirements of the position, including attendance and adherence to City of Phoenix 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 Phoenix. The City of Phoenix provides Workers' Compensation Benefits for volunteer workers if he/she should sustain an injury or illness arising out of and in the course and scope of his/her volunteer work.

By initialing and by signing, I also acknowledge that this consent gives my child/teen permission to be transported by City staff on field trips necessary to the volunteer work.

____ Initialing, provides my approval and permission for my child/teen to volunteer with the described activity / program.

NA Initialing, gives my approval and permission to provide transportation for my child / teen for field trips associated with the volunteer responsibilities.

Parent / Guardian: Print Name _____

Parent / Guardian Signature _____ Date: _____

Parent / Guardian Address, if different from volunteer:

City: _____ Day Phone: _____ Evening Phone _____

The City of Phoenix prohibits discrimination on the basis of race, ethnicity, national origin, sex, religion, age, sexual orientation, or disability in its services, programs and activities. Anyone who believes he or she has been discriminated against may file a complaint with the City of Phoenix Equal Opportunity Department. This publication can be provided in an alternate format upon request. Call 602-262-6862 (voice) or 602-262-6713 (TTY). 602-534-3787 (FAX). E-mail: Receptionist.PKS@phoenix.gov .