



**Volunteer Engagement – Youth Release/Parental Consent Form**

Individual Name \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**WAIVER**

St. Mary's Food Bank Alliance (Food Bank) operates as a working warehouse, and as such there are inherently dangerous activities on premises. I accept such risks and responsibilities for the losses and/or damages following an injury or other loss. I will hold harmless and waive any and all claims or causes of actions against the Food Bank including, but not limited to, claims arising out of negligent or intentional conduct of Food Bank employees, representatives or agents. I will use my personal insurance or that provided by my organization, as the primary provider in the event of accident or injury related to my work as a Food Bank volunteer. I will follow all rules and procedures given to me by Food Bank employees or agents, including dress code guidelines.

To attest that I/the minor child am physically fit and prepared to perform the tasks assigned as a Food Bank volunteer, subject to all personal limitations/restrictions as described to the Food Bank staff prior to the start of my shift. If at any time I feel unable to perform the work assigned, I will immediately cease working and report to Volunteer Engagement or the Food Bank staff for re-assignment.

\_\_\_\_\_  
**Signature of Volunteer**

\_\_\_\_\_  
**Date**

\*I hereby give my child/legal dependent permission to volunteer at the Food Bank and agree to uphold the above waiver.

\_\_\_\_\_  
**Signature of Parent/Legal Guardian**

\_\_\_\_\_  
**Date**