



**Team Ortho Foundation  
Volunteer Services Parental Permission Form**

Dear Parent or Guardian,

Team Ortho Foundation is grateful for your child's interest in volunteering and we take their safety very seriously.

Please understand the following:

- Team Ortho Foundation volunteers must be at least 14 years of age before their first shift.
- I understand that individuals between 14 and 17 wishing to volunteer with Team Ortho Foundation must have a parent or legal guardian read, understand and complete this form.
- I understand that my child will not be allowed to attend their shifts unless this form has been completed and returned to the Director of Volunteers at the time of OR prior to checking in for their first shift.
- No exceptions will be made.

I understand and recognize that my child's participation as a volunteer for Team Ortho Foundation involves potential risks. I hereby agree to accept such risks and to waive any rights to make a claim against Team Ortho Foundation, except in the case of the negligence. I hereby personally undertake to have my child act responsibly and in a safe manner at all times and hereby agree to indemnify Team Ortho Foundation and all Team Ortho Foundation employees, volunteers and partners from any claims or damages caused as a result of my child's negligence while acting as a volunteer.

I understand that photography and videography will be utilized during this event. I grant permission to the organization to use my child's likeness, voice, and words in television, radio, film, or in any other form for volunteer and race event recruitment.

By completing the information below, I understand and agree to all comments noted above.

Volunteer Name: \_\_\_\_\_

Parent/Guardian Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Contact Phone Number: \_\_\_\_\_