



FISH Youth Volunteer Waiver

PLEASE PRINT

Youth Volunteer Name: _____

Parent Phone: _____

Parent Email _____

Youth Volunteer Birthdate (M/D/Y) _____

All FISH volunteers under 18 years old MUST have a parent's consent.

I give my consent for _____ to volunteer at Broomfield FISH.

FISH of Broomfield is not liable for any action, activity or injury caused to volunteers by recipients and/or any action, activity or injury caused to recipients by volunteers.

I understand that all client files, names, and information are strictly confidential and said information will remain at FISH and will not be discussed outside of FISH.

I also hereby grant permission to Broomfield FISH to utilize any photographs or video taken of my child during their volunteer time for publicity/marketing purposes.

Parent Signature

Date _____