



Recreation and Parks Department
 2060 W College Avenue
 Santa Rosa, CA 95401
 (707) 543-3279

Parental Permission to Volunteer

If a volunteer is under 18, the volunteer’s parent or guardian must sign this form in order to participate.

Date of Project:	Time of Project:
Location/Site:	
Event Name and/or Project Description:	

By signing this form, I do hereby release, waive, discharge, and relinquish the City of Santa Rosa and its officers, employees, and agents from any liability, loss, damage, claim, demand or cause of action against them of any kind arising from, or in connection with, my child’s participation in the volunteer activity, whether the same is caused by their negligence or otherwise. Furthermore, I warrant that my child is in good health and has no physical condition that would prevent him or her from volunteering for this project.

Parent/Guardian Name and Signature

Parent/Guardian Name (please print)			
Parent/Guardian Signature			Date:
Phone		E-mail	
Emergency Contact			

Volunteer Name

Volunteer Name (please print)

Please Bring This Completed Form to the Volunteer Event, or Return To:

Jeffrey Tibbetts, Recreation Supervisor	(707) 543-3279
City of Santa Rosa Recreation & Parks	volunteer@srcity.org
2060 W College Avenue	
Santa Rosa, CA 95401	

Thank you for volunteering with Santa Rosa Recreation & Parks!