Hunger Intervention Program
Food security for all

Parental / Guardian Consent

Hunger Intervention Program ("HIP") requires parent or guardian consent for minor children to participate in volunteer activities. To provide consent, please read and complete the form below:

I, as the legal parent or guardian, grant consent for my minor child, _____, to participate as a volunteer for HIP.

I am not aware of any physical or medical condition that would interfere with my child's ability to participate as a volunteer for HIP. Should my child become injured or ill in connection with participation in volunteer activities with HIP, I consent to any such treatment, first aid and/or transportation that may be provided to my child and understand that HIP will not be responsible for any costs associated with any of the foregoing.

_____   _____
Parent/Guardian Signature   Date

Contact Information

Parent/Guardian 1 (*required*):

Name: _____

Relationship to Child: _____

Daytime Phone: _____

Parent/Guardian 2 (*optional)*:

Name: _____

Relationship to Child: _____

Daytime Phone: _____

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Media Release Agreement

I hereby consent to the use of my photograph, video. or other digital media for Hunger Intervention Program's use as still photographs, videotape, television presentations, and/or for any purposes necessary to the agency, waiving all claims for compensation.

I also hereby consent to the use of my name and biographical data to be used as indicated above.
Further, I hereby release Hunger Intervention Program, its directors, officers, employees, and/or assignees from any and all claims for damages, libel, slander, invasion of the right of privacy, or any other claims based on the use of said material.

Name (please print): _____

Signature:_____

If the person signing is under age 18, there must be consent by a parent or guardian, as follows:

I hereby certify that I am the parent or guardian of _____, named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

_____   _____
(Parent/Guardian's Signature)   (Date)

_____
(Parent/Guardian's Printed Name)