

New Hampshire Department of Natural and Cultural Resources
Volunteer Program

YOUTH VOLUNTEER PARENTAL CONSENT FORM
Must be completed for all volunteers under the age of 18

Youth's Name: _____

Will be volunteering at:_____

As a participant with (group name):_____

On Date(s) _____

The purpose of this document is to comply with the provisions of RSA 508:17 and 216-A:3-h, the Volunteer Immunity Laws. By serving as a volunteer you acknowledge that you are not an employee of the State of New Hampshire, and therefore not entitled to certain benefits provided to State of New Hampshire employees, including, but not limited to workers' compensation coverage. As a volunteer, you agree to abide by all policies and procedures and follow the instruction of your Designated Service Supervisor. Failure to do so will result in the termination of volunteer services for the New Hampshire Department of Natural and Cultural Resources.

I understand and accept the risks, hazards, and dangers inherent in carrying out the duties and responsibilities of my volunteer activities. I agree for myself and my heirs, to release and hold harmless, the New Hampshire Department of Natural and Cultural Resources, its (*trustees, officers*) employees, and volunteers, from and against all claims, demands, actions, and causes of action as a result of personal injury, death, or property damage sustained by me or by others due to my volunteer activity.

I give permission for the use of quotes/photos of my child in the newspaper, newsletter, Department of Natural and Cultural Resources websites, or in other ways to publicize volunteer events or activities.

Parent/Guardian Signature: _____

Date: _____

Relationship to Volunteer: _____

Received at DNCR by:_____

Date:_____