

California State University Volunteer Release Form for Minors Parent Consent Form

(To be completed and signed by parent/guardian of volunteer if volunteer is under 18 years of age)

Event/Activity:	Date:
Volunteer's Name: Address:	
Health & Accident Insurance Contact: Emergency Contact Name:	
I,	r legal guardian of consent to and authorize the Minor
I acknowledge and agree that activities performed by the Minor as a on a voluntary basis, without any pay, compensation, or benefits. I must comply with the rules and regulations established from time to do so may result in the Minor's immediate removal as a volunteer.	agree and understand that the Minor
I am aware of the nature of the activities to be performed by the Mirwill include, but are not limited to the following type of activities:	
I agree that all volunteer activities are to be performed by the Minor full responsibility therefore.	at the Minor's risk and I assume
On behalf of myself, the Minor, and our respective heirs and person indemnify and hold the State of California, the Trustees of the California State University Dominguez Hills and all of its officers, a volunteers free and harmless from and against all claims, damages, attorney fees, that my minor child may sustain while participating in release and discharge the CSU and the Trustees of the California St. University Dominguez Hills and all of its officers, employees, represent all claims, demands, causes of action of any nature or cause, for or suffered by the Minor. Parent/Legal Guardian Signature	Fornia State University, and employees, representatives and losses and expenses, including in the volunteer activity. I hereby ate University, and California State esentatives and volunteers from any
I have carefully read this agreement, waiver and release and fully unthis is a release of liability and a contract between California State Umyself and I sign it of my own free will.	
Print Full Name:	
Signature:	Date: