



Kids deserve the best.

### **PARENTAL CONSENT - MINOR VOLUNTEER**

Children's Wisconsin would like to take this opportunity to let you know how pleased we are that your teen has shown an interest in volunteering. This is a wonderful way to serve the community and develop a sense of responsibility, commitment, and serving others. Your teen will receive a first hand learning experience and learn about the value and benefits of volunteerism-which can be a wonderful lifelong lesson and experience.

It is important that your teen work closely with our staff and other adult volunteers as they perform their volunteer duties and responsibilities, and understand that they are expected to follow the rules and regulations of the program or event that they are volunteering for. Children's Wisconsin staff and other adult volunteers will guide and assist them, and they should feel free to ask questions if they are uncertain about any related duty, task or concern that develops in the course of their volunteering.

Certain volunteer experiences and opportunities within certain Children's Wisconsin may require that we conduct a background check and health screening to insure the safety of our clients, patients and staff. For these special circumstances, Children's Wisconsin staff will inform your child and you of such requirements.

Whether your teen volunteers for a one time special event experience or becomes a regular agency volunteer—Children's Wisconsin requires that you sign this parental permission slip allowing your child to volunteer. If you have any questions, please contact Children's Wisconsin staff member \_\_\_\_\_ at \_\_\_\_\_.

#### **Parental Permission/Consent**

**Volunteer Name:** \_\_\_\_\_

**Program/Service Volunteering For:** \_\_\_\_\_

**Expected Time Commitment of Volunteer Service:** \_\_\_\_\_

**I hereby give permission for my teen to serve as a volunteer for Children's Wisconsin.**

\_\_\_\_\_  
**Printed Name and Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**