

Richmond State Supported Living Center
Parent or Guardian's Permission
for Child Under 18 Years of Age to Volunteer

I give my permission for my child (enter child's name) to participate in DADS Richmond State Supported Living Center volunteer program and take all necessary orientation, training and instruction, as specified in the current DADS Policy and Procedure Program Manual.

My child and I agree to follow all department rules, policies and procedures pertaining to the volunteer placement as cited in the DADS Policy and Procedure Program Manual, specified in the attached Volunteer Assignment Description, and as explained to us by Richmond State Supported Living Center staff. We understand that the facility is not to be held responsible in the case of an accident. We understand that neither DADS nor Richmond State Supported Living Center is responsible for any injury that my child might suffer or any loss or damage to our personal property that might occur as a result of my child's participation in this volunteer assignment. We will indemnify and hold harmless the Texas Department of Aging and Disability Services, its facilities, its consumers, its employees and agents for any such injury or damage.

We have read and fully understand the above statements.

Signature of Parent or Guardian	Date
Address (Street, City, State, ZIP)	Area Code and Telephone No.

I attest that I am currently 14 years of age or older.

Signature of Child	Date	Date of Birth
Address (Street, City, State, ZIP)	Area Code and Telephone No.	

Emergency Contact Information:

Name	Area Code and Telephone No.
Name	Area Code and Telephone No.