



VOLUNTEER PARENT/GUARDIAN PERMISSION FORM

****Must be signed by a Parent or Guardian for ALL volunteers younger than 18 years.**

Name of Child(ren) : _____

Birthdate (mm/dd/yyyy) : _____

I, the undersigned, acknowledge and understand that my child(ren) will participate as a volunteer in the Richmond Hill Phoenix Tournament from _____ to _____ and there may be inherent risks associated with participating in the program, including all manners of injury, and property damage, risks associated.

In consideration of my child(ren) participating in the program, I hereby give my permission for my child(ren) to participate in this activity.

Parent/Guardian Signature : _____

Date (mm/dd/yyyy) : _____

Print Name of Parent/Guardian : _____