

**VOLUNTEER PARENT/GUARDIAN CONSENT FORM**

(Required for youth volunteers under 19 years of age)

Volunteer information:

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Age: \_\_\_\_\_

I, \_\_\_\_\_ (parent/guardian name), hereby give consent for my child or legal ward, as named above, to volunteer with the Positive Living Society of British Columbia. I understand the above-named volunteer will participate and volunteer with the Positive Living Society of British Columbia.

I HEREBY AGREE to release and hold harmless the and its agents, employees and representatives from any and all liability of any kind or nature whatsoever in connection with any loss, damage or expense suffered or incurred by the above-named youth volunteer as a result of an act or failure to act, intentional or unintentional, by (I) any person who is not an agent, employee or representative of the Positive Living Society of British Columbia or (II) any other volunteer.

I understand that the Positive Living Society of British Columbia and its representatives will take all reasonable steps to provide an environment in which everyone's safety is of prime importance. The Positive Living Society of British Columbia volunteers are supervised, but Positive Living Society of British Columbia cannot take direct care and control of your child.

I am aware that the Positive Living Society of British Columbia and its volunteers cannot assume responsibility for any injury, loss, damage or harm to any child or to his/her property during the course of any activity, which is part of the above program, including traveling to and from the sites. I understand and acknowledge that certain risks of injury, loss, damage or harm are inherent to participation in any program or activity and I agree to indemnify and save harmless Positive Living

Society of British Columbia sponsors, officers, employees, agents and volunteers from and against any injury, loss, damage or harm that may befall my child(ren) as a result of participation in organized activities and volunteer responsibilities.

Permission is hereby granted for the Positive Living Society of British Columbia take and use photos of the above mentioned child/youth for promotions and records.

I hereby grant permission for my child to volunteer with the Positive Living Society of British Columbia I declare having read and understood the above terms and hereby consent to my child to participate.

Signature (Parent or Legal Guardian of Youth Volunteer)

---

Print name

---

Date

---

Positive Living Society of British Columbia  
1101 Seymour Street.  
Vancouver, BC V6B 0R1  
Fax 604-893-2251 Phone 604-893-2200  
[www.positivelivingbc.org](http://www.positivelivingbc.org)  
Positive Living Society of British Columbia

1101 Seymour Street  
Vancouver  
BC V6B 0R1

**WWW.POSITIVELIVINGBC.ORG**  
REGISTERED NON-PROFIT SOCIETY REG # 11928-2085

**t** 604.893.2200  
**e** [info@positivelivingbc.org](mailto:info@positivelivingbc.org)  
**f** 604.893.2251