



GARDEN VALLEY YOUTH VOLUNTEERS

GARDEN VALLEY HIGH SCHOOL

2026-2027 PARENT/GUARDIAN PERMISSION & RELEASE FORM

Student Name: _____ Grade: _____

Student Phone: _____

Parent/Guardian Name: _____

Parent/Guardian Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Club Mission:

Garden Valley Youth Volunteers is a youth driven, community focused club, that aims to give back to the community that gives so much to them. Students will work to support local organizations, public land, address needs of and community and its members, all while cultivating a heart for service.

Volunteer Program

I give permission for my student to participate with Garden Valley Youth Volunteers in 2026-2027. Volunteer activities may be organized by the Garden Valley Youth Volunteers club or independently by my student. The club uses an app named Helper Helper to communicate volunteer opportunities, student sign up, track time, provide verification of hours, and produce reports.

I understand that my student may participate in volunteer activities at a variety of locations throughout the community, including but not limited to schools, parks, community organizations, nonprofit organizations, public spaces, events, roadside cleanup, and other locations.

I understand that volunteer activities may involve different environments, tasks, and levels of physical activity. Specific activities and locations may vary depending on the volunteer opportunity. Students are encouraged to use good judgement to always prevent injury. Protective equipment will be available for club use. Students will be encouraged to use these during group and independent volunteering opportunities.

Transportation

☐ I understand that transportation arrangements may vary depending on the volunteer activity. I give permission for my student to transport themselves to and from volunteer locations.

Medical/Emergency Information: In the event of an emergency, I authorize school/club personnel to seek appropriate medical attention for my student when I cannot be reached promptly.

Allergies or medical considerations the school/club should be aware of:

Release of Liability:

I understand that participation in community volunteer activities may involve ordinary risks associated with travel, working at different locations, interacting with the public, physical activities, weather conditions, equipment, or other circumstances associated with volunteer service.

On behalf of myself and my student, release and hold harmless Garden Valley High School, Garden Valley Youth Volunteers, their employees, volunteers, supervisors, and representatives from claims arising from my student's participation in volunteer activities.

Parent/Guardian Acknowledgment:

Students participating in clubs affiliated with Garden Valley Schools will follow the policies and procedures set forth in the Garden Valley Schools code of conduct and the Garden Valley Schools Student Handbook. The same level of student conduct is expected off campus as is required while on school grounds. Any offenses will be dealt with in the same manner as if the student were at school.

By signing below, I confirm that:

- I have read and understand this permission and release form.
- I give my student permission to participate in Garden Valley Youth Volunteers activities.
- I understand that volunteer activities may take place at various locations throughout the community.
- I understand that volunteer opportunities and locations may change from one activity to another.
- I have provided accurate emergency contact and medical information.
- I understand that my student is expected to follow school rules, club expectations, and instructions provided by supervising adults and volunteer-site personnel.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____