

2017 VOLUNTEER APPLICATION PARENTAL WAIVER

Volunteer Child Name:			Age:
Team Assignment:			
I hereby release, discharge and agree to hold	Sweet Home	Economic Deve	elopment Group (SHEDG d.b.a.
The Oregon Jamboree) harmless from any and all claims, liabilities, damages, losses, or expenses arising			
from or caused by any hazard, whether or not covered by insurance, resulting from or related to my			
son/daughter's volunteer activities with The Oregon Jamboree.			
Parent/Guardian Printed Name:			
Parent/Guardian Signature:	Date:		
Parent/Guardian Address:			
Street:			
City:	State:		Zip:
Parent/Guardian Phone:			
Best time to reach you? (Circle one)	Day	Night	Weekend
Does your son/daughter have any physical lin	nitations? Y	N	
If yes, what are they?			
	ERVISOR USE	ONLY	
I have verbally verified the above information	n: Y N		
This application approved: Y N			
Comments:			
Supervisor Signature:			Date: