

Parent's Release Form

This shall serve as verification that I am aware that my child will be volunteering at The Samaritan Inn, 1710 N. McDonald, McKinney, Texas 75069. While he/she is on the premises of The Samaritan Inn it is my understanding that he/she will be instructed to perform duties in accordance to the rules and regulations of the center. The Samaritan Inn and or FBC Lavon is not responsible for any incidents that may occur during this time.

My Child is volunteering for (Circle One):

Church

School/civic group

Court ordered community service

Independent/Personal Satisfaction

The following are the persons who may drop off/pick up my child:

I understand that The Samaritan Inn may ask for identification from all persons retrieving underage volunteers.

I have been informed that my child and I will be asked to sign in on the Volunteer Sign In Book of The Samaritan Inn. This procedure will be followed ever time they come to volunteer.

Child's Name: _____

Parent's Name: _____

Address: _____

Telephone #: _____

Additional Telephone #: _____

In case of emergency who should be contacted? _____

And their phone numbers: _____

Parent Signature: _____ Date: _____