

MICHIGAN TECHNOLOGICAL UNIVERSITY

Volunteer Service Agreement & Release – Parental Consent Required of all participants under 18 years of age.

Ву	signing below, I	, hereby attest to the fol	lowing:
	(Name of Legal Guardian)		
1.	I am the legal guardian of(Name of Volunteer Partici		r eighteen years
	of age, and has my permission to participate as a	volunteer from to _	(End Date)
	at Michigan Technological University, according to	o the duties described as follows:	
2.	In consideration of allowing him/her to participate release and discharge, and agree to indemnify and Board of Control, employees and agents from any present or future, whether the same be known or death or property damage resulting from or arising also agree that I shall be fully responsible for any upon the University's facilities during his/her part	d hold harmless Michigan Technological and all claims, demands, damages, or or unknown, anticipated or unanticipated or unanticipated or unanticipated and of his/her participation in the voluand all loss or damage that he/she inflici	University, its causes of action, l, for bodily injury, unteer service.
3.	I understand that as a university volunteer Michig with accident or medical insurance, and is therefore incurred by him/her and me. Further, I understan Compensation nor entitled to employee benefits	ore not responsible for any accident or not that he/she is neither covered by Wo	nedical expenses rker's
4.	I have read and understood this Volunteer Service document of my own accord.	e Agreement and Release and I do volun	tarily sign said
	Signature of Legal Guardian	Date	
	Printed Name Print the full name and address of a person who can be reached in case of an emergency.		
	Print Name	Relationship	
	Address	Phone Number	

Provide one copy of this agreement to the university volunteer, one copy to the Risk Management Office, and the original to Human Resources. Retain this agreement for five years from the end of service.