



VOLUNTEER SIGN-UP FORM FOR MINORS

NAME _____ EMAIL _____ BIRTHDATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

CELL PHONE _____ HOME PHONE _____ BEST TIME TO CALL _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOW DID YOU FIND OUT ABOUT US? _____

REFERRED BY _____ PHONE _____

VOLUNTEER EXPERIENCE _____

Volunteer Opportunities:

- My PlayClub** (Bi-monthly play dates at playgrounds)
- Special Events** (Volunteer for the morning at our Walk & Roll in September)
- Research Assistance** (Online research from home)
- Social Media Ambassador** (Be an influencer to help spread awareness)

PARENT/GUARDIAN NAMES _____ CELL PHONE _____

I give permission for my child _____ to participate as a volunteer with Inclusion Matters. I hereby assume full responsibility for my child and hold harmless Inclusion Matters for bodily injury fatal or otherwise or damage/loss of property.

PARENT/GUARDIAN SIGNATURE

DATE

WITNESS

Please note that the State of California has mandated that all volunteers under the age 18 (17 or younger) must be accompanied by a parent or guardian while volunteering. Thank you for your help enforcing this.