

ADOPT-A-CEMETERY-PROJECT PROGRAM

Minor Authorization Form

(To be completed for each and every participating volunteer under the age of 18.

Participating minors must be over the age of 14.)

The undersigned represents that as a parent or guardian, I have the legal right to sign documents for the minor herein and I am authorized by law to do so.

I hereby grant permission for _____,
age _____, to serve as a volunteer for the County of El Dorado.

I understand that the rights and responsibilities of the above-named volunteer and of the County are outlined in the Adopt-a-Cemetery-Project Program guidelines, and that I have explained these expectations to the above-named minor.

Signature of Parent/Guardian

Date

Primary Emergency Contact

Name of Parent/Guardian		Relationship to Minor	
Home Phone	Cell Phone	Work Phone	
Street Address, City, State, Zip Code			

Secondary Emergency Contact

Name of Adult		Relationship to Minor	
Home Phone	Cell Phone	Work Phone	
Street Address, City, State, Zip Code			

Executed and submitted herewith on behalf of the minor is a *Release, Hold Harmless and Agreement Not to Sue* signed by the Parent/Guardian.