Mentor Public Library

Parental Consent Form for Youth Library Volunteer with Waiver of Liability, Hold Harmless and Indemnity

In order for your child to become a volunteer with the Mentor Public Library, we need your consent and agreement to waive any claims of liability and to hold harmless and indemnify. Please read and sign this Form if you would like the Mentor Public Library to continue the process of considering your child as a volunteer. The Mentor Public Library welcomes volunteers ages 14 and over.

Note: This Form must be filled out for all volunteers under age 18. Mentor Public Library cannot accept volunteers under the age of 12.

Name of Youth Volunteer (please print clearly) _______________________________________

I understand that my child (named above) wishes to be considered for volunteer work and I hereby give my permission for him/her to serve in that capacity, if accepted by the Mentor Public Library. I understand that he/she will be provided with any training necessary for the safe and responsible performance of his/her duties and that he/she will be expected to meet all the requirements of the position, including regular attendance and adherence to library direction or supervision as well as policies and procedures. I understand that my child may be photographed in the course of performing volunteer duties and those photos may be used by the Mentor Public Library. I understand that he/she will not be considered as an employee and will not receive monetary compensation or employment related benefits for the services contributed.

I hereby agree to waive and release from liability and to hold harmless and indemnify the Mentor Public Library or any of its representatives, agents, or employees for any injury, illness, loss, or damage sustained by my child during the performance of his/her duties as a volunteer for the Mentor Public Library.

In signing this release and waiver of liability, hold harmless and indemnification agreement I acknowledge and represent that I have read the foregoing document carefully and completely, no oral representations, statements, or inducements, apart from the foregoing written agreement have been made; and I execute this release for full, adequate, and complete consideration fully intending to be bound by the same.

I have reviewed, understand, accept and will comply with the Mentor Public Library Volunteer Code of Conduct, the Behavior and Conduct Policy and the Volunteer Waiver of Liability which are attached hereto and made a part hereof as though fully set forth herein at length.

This agreement is made and entered into this______ day of_________ 201__ at Mentor, Ohio.

Parent/Guardian Name (print clearly) ________________________________________________

Parent/Guardian Signature __________________________________________________________

Relationship to volunteer ____________________________________________

Preferred Phone Number __________________________ Additional Phone ________________

Email Address __________________________________________ Date _____________________

Please sign and return this form to:
Mentor Public Library, Volunteer Coordinator
8215 Mentor Avenue Mentor, Ohio 44060

Approved by the Board of Trustees
October 21, 2015
Resolution #15-087