



PARENT/GUARDIAN CONSENT FORM

A parent or legal guardian of any child under the age of 18 participating as a volunteer at Mississauga ITALFEST on either Friday, August 19, 2016 or Saturday, August 20, 2016 MUST sign this form. Please submit this completed and signed form by email to volunteer@mississaugaitalfest.com at the time of application and bring a copy of the signed form to the event.

I hereby grant permission for my child (first and last name of child) _____ to fully participate in Mississauga ITALFEST as a volunteer.

By signing this form, I hereby affirm that:

1. I am the parent/legal guardian of said child.
2. I recognize and appreciate any dangers and risks inherent in my child participating as a volunteer at the event.
3. I am aware this application is a release of all liability and a contract enforceable against me, my assigns, heirs, next of kin, distributes, guardians, legal representatives, successors, administrators and executors forever.

Having read and understood this permission form in its entirety, I hereby agree to be bound by the terms and conditions of this release.

Name of Parent/Legal Guardian: _____

Address: _____

Phone: _____

Signature of Parent/Legal Guardian: _____

Date: _____

Emergency Contact Information

Name & Relationship of Emergency Contact: _____

Telephone Number of Contact: _____