

VOLUNTEER RELEASE FORM FOR MINORS (under the age of 18) PARENTAL CONSENT REQUIRED

, being the parent or legal guardian of		
(the "Minor") hereby consent to and authorize th	e Minor to act as	a volunteer for Heathcote Botanical Gardens. I
acknowledge and agree that activities performed	by the Minor as a	volunteer will be performed strictly on a voluntary
basis, without any pay, compensation, or benefits	s. I agree and und	erstand that the Minor must comply with the rules
and regulations established by Heathcote Botanic	al Gardens and th	at failure to do so may result in the Minor's
immediate removal as a volunteer.		
I am aware of the nature of the activities to be pe	erformed by the M	linor as a volunteer and recognize that in performing
volunteer tasks, a risk of harm or injury exists. I a	gree that all volun	teer activities are to be performed by the Minor at
the Minor's risk and I assume full responsibility th	ierefore.	
On behalf of myself, the Minor, and our respectiv	e heirs and perso	nal representatives, I agree not to hold or attempt to
hold Heathcote Botanical Gardens, their populati	on served, volunt	eers, or staff responsible for any injury or damage
sustained or incurred by the Minor, arising out of	or in any way cor	nnected with the Minor's activities as a volunteer for
Heathcote Botanical Gardens. I hereby release an	d discharge Heath	ncote Botanical Gardens, their employees, and their
volunteers from any and all claims, demands, cau	ses of action of ar	ny nature or cause, for any such injury or damage
incurred or suffered by the Minor.		
Signature of Parent/Legal Guardian	Date	
Printed Name of Parent/Legal Guardian		
Phone Number(s) for Emergencies		_
Signature of Volunteer Coordinator or Designee	Date	_
Printed Name of Volunteer Coordinator or Design	166	

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Volunteer Name:
Check here if Volunteer is under age 18
Contact E-mail (required):
Parent or Legal Guardian Email (required if Volunteer is under age 18):
Address:
Phone:
Emergency Contact Name:
Relationship to Participant:
Phone Number:
☐ Check here to receive the Heathcote Botanical Gardens Newsletter.
*VOLUNTEERS MUST COMPLETE THE WAIVER AND RELEASE FORM

*PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER AGE 18

Please return to: Heathcote Botanical Gardens (info@heathcotebotanicalgardens.org), or turn the form in personally to: Heathcote Botanical Gardens, 210 Savannah Rd., Fort Pierce, Fl 34982 772-464-4672