

SCULLVILLE VOLUNTEER FIRE DEPARTMENT
1708 Somers Point Mays Landing Road
Egg Harbor Township, New Jersey 08234

PARENTAL PERMISSION FORM

In order to effectively manage the people working with and assisting the fire department in its recreation activities, including but not limited to the Halloween attractions, hay-rides, and mazes, The Scullville Volunteer Fire Department requests formal parental permission for the youth who graciously volunteer their time and energy.

Please print:

I, _____ (parent or legal guardian), do grant my permission for my son/daughter _____, age _____, to work with and assist the Scullville Volunteer Fire Department with its Halloween or other recreational community attractions.

I understand that by signing this form my child may come into contact with other children and adults, whose conduct is not under the fire department's control.

I further understand that my child may be asked to perform physical activities during the course of my child's volunteer endeavors, and I do / do not (circle one) grant permission for my child to do so.

Please note: No one will be forced to engage in any activity or conduct beyond their physical abilities. Participation is *strictly voluntary* and only within the bounds of one's physical and mental ability, as determined/assessed by supervising Members of the Scullville Fire Department and as demonstrated by the volunteer.

I understand that my child is volunteering his/her time and will not be monetarily compensated.

Signature: _____

Date: _____ Emergency contact #: _____

Thank you for your support! We love our volunteers!