



I give my permission for my child \_\_\_\_\_ (full name), to participate in volunteer habitat restoration activities with Fermilab Natural Areas.

I understand and agree that in signing up and volunteering for the Fermilab Natural Areas (FNA), I recognize and acknowledge that there are certain risks of physical injury to volunteers, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I or my minor child/ward may sustain as a result of my volunteer services. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in volunteer services for FNA, including its board, members, and volunteers.

FNA is committed to conducting its programs and activities in a safe manner and holds the safety of volunteers in high regard. FNA continually strives to reduce such risks and insists that all volunteers follow safety rules and instructions that are designed to protect the volunteer's safety. I understand that it is my (or my minor child's) responsibility to wear personal protection equipment (PPE) during activities that warrant PPE such as seed harvesting and processing, brush cutting, and sawing. I further understand that as a volunteer, I (or my minor child) am not entitled to benefits normally associated with employment such as, medical insurance, workers' compensation insurance and unemployment insurance.

Parent's name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Emergency phone number \_\_\_\_\_