



Minor Volunteer Release and Waiver Form

I hereby certify that I am the adult parent or guardian of _____, a minor child who is _____ years old*, and I consent to his/her participation in a volunteer capacity with F.A.R.M. Café, Inc.** In the case that an emergency occurs, I authorize the person in charge to seek qualified medical aid for any injury sustained by my child. I understand that all costs incurred for medical expenses are my responsibility. Also, I understand that my child is expected to act in an appropriate manner, and, if my child does not behave appropriately, I may be required to pick him/her up at the site. Once this document is signed, I understand that the F.A.R.M. Café Board of Directors, Staff, and Affiliates are not liable or responsible for any personal injury, loss of property, negligent, willful or intentional act. Additionally, I acknowledge that my son/daughter's participation in volunteering with F.A.R.M. Café, Inc. is entirely voluntary and understand that they are subject to the rules, procedures, and regulations of this organization. Furthermore, I acknowledge that I have read and understand the above statements and that I am of legal age to bind myself to this release waiver.

*Any child under the age of fifteen (15) must be supervised by an accompanying parent/guardian at all times, and any child under the age of ten (10) may not volunteer in a food service position.

**This includes: a) the premises at 617 West King Street, Boone, NC 28607; b) The F.A.R.M. Café Garden Spot located in Valle Crucis; and/or c) any F.A.R.M. Café sponsored event.

Name of Parent/Guardian (*Please Print*)

Signature of Parent/Guardian

Date