



## Teen Volunteer Parent Release Form

Teen Name		
staff is not receive valua	esponsible for monitoring the able volunteer experience under	unteer with the Chattahoochee Valley Libraries. I understand that library ttendance of my son/daughter. I understand that my son/daughter will or library staff supervision and that as a Teen Volunteer; my son/daughter om or be insured by the Chattahoochee Valley Libraries.
and I unders		abides by the volunteer requirements outlined in the volunteer handbook sponsible for obeying library policies and procedures, and should a ve the program.
		applying to be a Teen Volunteer with Chattahoochee Valley Libraries. et your teen to meet his or her obligations to fulfill this commitment.
2. I re rem vol. 3. I ve 4. I ur 5. By	nain except to use library mate unteers only) and that all mee wrify the accuracy and complet understand that library staff may	er schedule. o have transportation to and from the library and that my teen should not ials or services. I also understand that meeting locations may vary (TAG tings may not be held at one library location. eness of the information on my teen's application. communicate with my teen by e-mail. library to use my child's name and photograph in library publicity
Parent/Lega	al Guardian	
Parent's Sig		
Work	Cell Phone	Date
		PHOTO RELEASE
Such use inc and/or video	ludes the display, distribution, taken of my child for use in n	tion to the Chattahoochee Valley Libraries to use the image of my child. publication, transmission, or otherwise use of photographs, images, laterials that include, but may not be limited to, printed materials such as tal images such as those on the Chattahoochee Valley Libraries Web site
Parent/Lega	al Guardian	Date