

Bedford Youth and Family Services
12 Mudge Way
Bedford, Ma 01730
Phone: 781-275-7727 Fax: 781-275-7767
www.bedfordma.gov/youth

VOLUNTEER OPPORTUNITIES PROGRAM PARENT PERMISSION FORM

This release form must be signed before any applicant, under age 18 can view our Volunteer Posting Book or be referred for volunteer opportunity through Bedford Youth and Family Services.

I, _____(hereinafter “Applicant”) do hereby acknowledge and agree as follows:

1. I have requested that the Town of Bedford (hereinafter “Town”) provide to me the name(s) of potential volunteer sites who may wish to provide volunteer work for me.
2. This referral is not intended to impose any liability upon the Town and is provided solely at the request and for the convenience of prospective agencies with volunteer opportunities and the applicant.
3. The Town has made no representations or warranties of any kind or nature regarding such volunteer sites, including but not limited to their compliance with any Federal, State or municipal statutes, ordinances, by-laws rules and regulations.
4. In the event that any volunteer site to whom I am referred by the Town shall bring any action against the Town, I do hereby agree to indemnify and hold the Town harmless with respect to any cost or damages which shall be assessed against or be paid by the Town as a consequence of this volunteering.
5. I understand that Bedford Youth and Family Services screens no volunteer sites or its employees.
6. I shall indemnify and hold harmless and do hereby release remise and forever discharge the Town from any and all liability, claims, suits, losses, causes of action or damage arising or occurring out of my volunteering.

Applicant
(if under 18, parent must sign form)

Date

Parent/Guardian

Date