

WAIVER AND RELEASE OF LIABILITY AND HOLD HARMLESS
FOR PARTICIPATION BY A MINOR IN
NORTHFIELD TOWNSHIP FOOD PANTRY VOLUNTEER PROGRAM

My name is:_, I am the **parent/legal guardian** of : , **a minor**, who resides with me at the following **address**:

- I would like:_, **minor**, to participate in the Northfield Township Food Pantry Volunteer Program (sometimes hereinafter referred to as the "Program").

The Program has been explained and described to me as follows:

The Northfield Township Food Pantry ("Food Pantry") has been operating for over 40 years. It was started in an effort to help Northfield Township residents who, for various reasons, have found it difficult to provide enough food for themselves and their families. The Food Pantry is sustained entirely by contributions from individuals, community organizations, schools and churches who generously donate time, services, food and/or funds. No tax dollars are used to stock the Food Pantry. The Food Pantry relies completely on voluntary support from the community.

As a volunteer for the Food Pantry, it has been explained to me that:_, **the minor**, may be called upon to stock shelves, sort food and/or other donated items and perform other Pantry related duties at the Food Pantry located at 2550 Waukegan Road, Glenview, Illinois, 60025. I understand and acknowledge that heavy lifting and loading are required for this Program.

In consideration of the Food Pantry allowing: , **the minor** to volunteer for the Program as described above, I hereby waive and release, on behalf of :_ **the minor** and myself, any liability, claim or cause of action for personal injury or property damage that may accrue to: , **the minor**, or me, as a volunteer for the Program, against any person or entity, including but not limited to, the Food Pantry, the Township of Northfield, and/or their respective officials, trustees and/or employees, or any persons or entities affiliated with the Program. I assume all risk of personal injury, death, property damage and/or any other loss that either I or: , the minor, may sustain or cause to others as a result of participation in the Program.

In further consideration of allowing: , **the minor** to provide volunteer service for the Program, I agree to maintain in confidence any information I may learn or receive about the names and addresses or finances of any persons that utilize the Food Pantry and also to advise:

_, **the minor**, that any information he/she receives about names, addresses, and/or finances must remain confidential and not be discussed with any other person(s). I further agree to indemnify and hold harmless the Food Pantry, the Township of Northfield, and/or their respective officials, trustees and/or employees, or any persons or entities affiliated with the Program, from any and all liability, claims, demands or actions arising out of: the minor's participation in the Program.

I have had the opportunity to read this waiver, release and hold harmless and to ask questions about this document and the Program, which questions have been fully answered by representatives of the Program. I fully understand the terms of this waiver and release and hold harmless which I am signing below as my free and voluntary act on behalf of myself and: the minor.

Name of parent or legal guardian: Signature:

Telephone No.: _____ **Date:** _____ **Address:**